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ABSTRACT

The primary objective was to determine whether untrained undergraduate students could become effective as behavior modification consultants to teachers. Students from different undergraduate majors were given 10 weeks of guided experiences in interviewing and program designing. This was followed by field experiences involving actual consultation with Headstart, preschool, or hearing and speech clinic cases. Students interviewed referral teachers for 1 hour, designed behavioral programs tailor-made for the referral cases, then reconvened with the teachers to instruct them on the implementation of the programs. All programs were designed so as to be implemented by the teachers themselves with their own resources. Follow-up data indicated that such programs were successful in effecting the desired changes in the target children's behaviors. Project data include an outline for training paraprofessional students and data on selection measures. (An 11-item bibliography is included.) (Author)



Final Report

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THE EFFECTIVENESS OF PARAPROFESSIONAL STUDENTS AS BEHAVIOR CONSULTANTS TO TEACHERS

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March 1973

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I. INTRODUCTION:

- A. SUMMARY The primary objective was to determine whether untrained undergraduate students could become effective as behavior modification consultants to teachers, Students from different undergraduate majors were given ten weeks of guiled experiences in interviewing and program design. This was followed by field experiences involving actual consultation with Headstart, preschool, or hearing and speech clinic cases. Students interviewed referral teachers for one hour, designed behavioral programs tailor-made for the referral cases, then reconvened with the teachers to instruct them on the implementation of the programs. All programs were designed so as to be implemented by the teachers themselves with their own resources. Follow-up data indicated that such programs were successful in effecting the desired changes in the target children's behaviors. Project data includes an outline for training paraprofessional students, and data on selection measures.
- B. INTRODUCTION There has been an increasing awareness of the importance of early childhood experiences. Along with this has been a developing recognition of the crucial role of preschool environments in affecting children. Adults working in these settings, i.e., teachers and teacher aides, have felt a need for better programs in child management. This project was aimed at evaluating a means for providing a response to such a need through paraprofessional consultants.

Paraprofessionals are more and more being called upon as possible resources for dealing with differing problems. Carkhuff and Truax (1965) relied upon lay personnel to act as therapists for mental patients; Coven, Leibowitz, and Leibowitz (1968) trained retired men and women to function as mental health aides with primary grade children; and Hallowitz and Riessman (1967) have used indigenous inhabitants as paraprofessionals in a community mental health program. Students at undergraduate colleges such as Harvard, Radcliff, Brandeis, and McGill have been successful as therapists with chronic psychiatric patients (Greenblatt & Kantor, 1962; Poser, 1966).

Paraprofessionals have been shown capable of learning to use behavior modification in applied settings. For example, parents have learned to help their children in self-care, control of inappropriate behavior, physical rehabilitation, and relief from self-mutilation (Mira, 1970). Parents have also acted as therapists using behavior modification in treating dyslexia in their children (Ryback & Staats, 1970). Black technicians were effective with gretto children (Staats, Minke, & Butts, 1970), and paraprofessionals worked well in a community program in Appalachia (Wahler & Erickson, 1969).

Briefly, behavior modification is a method of bringing about behavior change, based upon empirically derived laws of learning. Such laws indicate the ways in which to improve the learning of new skills or the elimination of maladaptive or unwanted behaviors. It can be applied valuably to a variety of educational endeavors, such as improving performance, extinguishing disruptive behaviors, increasing motivation, fostering attentiveness and cooperative skills, and decreasing antisocial actions. Extensive research is available demonstrating the effectiveness of the approach, and reviews may be found in Bandura (1969) and Franks (1969). It was felt that what was needed is a sound research project which capitalized upon the advantages of behavior modification, the available pool of undergraduate paraprofessionals, within a consultation model. Such an approach was the format for this project.

Over the past five years, the principal investigator has developed a model for behavior modification consultation. Through this model, advanced graduate students in psychology have been trained to consult with teachers. Such consultation involves interviewing the teachers, identifying the circumstances related to the problems of



the child who is of concern, then providing a behavior modification program for the teachers to implement. Baseline data compared with data after the initiation of such programs have supported the conclusion that the consultation efforts have been valuable. The success of such efforts have demonstrated two factors:

- (a) Behavior modification programs can be designed which can be of help to children, without claborate equipment.
- (b) Graduate psychology students can act as consultants to teachers with effectiveness.

A consequence of the graduate training program was a grant from the State of Colorado, Department of Institutions, Division of Mental Retardation for the implementation of a consultation model using mobile teams. These teams travelled to four demonstration agencies for the mentally retarded, helping teachers to design behavior modification programs. As a direct result of this demonstration project, the Division of Mental Retardation has added four new staff members to continue the service, extending the concept to a regional basis. Since some of the demonstration agencies included preschool facilities, the project demonstrated the applicability of the consultation concept to early education.

The current project is a logical extension of the previous work. It primarily aims at determining whether paraprofessional undergraduates, including non-psychology students, can be trained in consultation activities. The consultation model to be tested presumes no special training or experience in psychology, and emphasizes consultation, rather than direct work with the children. The project provided training in consultation and interviewing, and in behavior modification program development.

The project had several objectives:

- (a) To train select undergraduates in behavior modification consultation.
- (b) To evaluate the effectiveness of such consultation.
- (c) To develop a model for screening and training.



To achieve such objectives, the project was divided into two phases: Phase I involved the screening and training of paraprofessionals, and Phase II involved the development of behavioral programs for teachers by the paraprefessionals.

C. METHODS - The general methodology is outlined here. Because a major part of the project involved the design and implementation of a screening, selection, and training set of models, more details will be presented in the Results section.

The procedures involved in the selection process involved the following:

- (a) Prescreening Following the determination of the traits of the paraprofessionals desired for training, telephone calls and letters (Attachment A) were sent to faculty known to have close relationships with undergraduates. These faculty were members of departments of child development, hearing and speech, education, occupational therapy, social welfare, psychology, and the Office of Student Advising. Also contacted was the Assistant Vice President for Instructional Development. These faculty were invited to recommend students who met the criteria listed in the letter. This procedure enabled a prescreening of candidates for training.
- (b) Applicant Contact Students recommended by faculty were contacted by telephone, by letter, or in person, and invited to apply for training (Attachment B).
- (c) Screening of Applicants The screening involved several steps and measures (Attachment C);
 - (1) Interview 1 all applicants were interviewed by the principal investigator and rated on a 5-point scale.



- (2) Application Form applicants then filled out an application. This application included demographic questions, plus ratings of elementary school teachers. Regarding the ratings, the premise was that successful consultants are those with positive attitudes towards the function of teachers today, and/or favorable reminiscences of their own early education.
- (3) Interview 2 applicants were then interviewed and rated by one project staff member.
- (4) Degmatism Scale & Edwards Personal Preference Schedule applicants then completed these two scales. The premises were that successful trainess would be more open minded, and would show moderate levels of autonomy, dominance, but low levels of deference and abasement. (Since the project aimed partly at examining screening measures, these scales were not used for selection, but examined at the termination of the project to determine their potential use as screening tools).
- (5) Class Schedules applicants were selected on the basis of the combined interviewers' ratings. The highest 20 applicants were invited to participate. Where class schedule conflicts prevented participation, the next highest rated student was then invited.

The procedures involved in the training and consultation phase included the following:

(a) Training - The training model involved a 60 hour training experience in interviewing and behavior modification program design, followed by a field placement. In the field placement, paraprofessionals worked with teachers in the community. Further details of the training model are presented in the Results section. This 60 hour training was Phase I training.



- (b) The field placement previously mentioned was offered to 10 of the students who completed the 60 hours training in the classroom. These were considered by the project staff as the most promising by virtue of observation of their performances during the 60 hour training. The field placement involved assigning one or more paraprofessionals to an agency. These paraprofessionals actually worked there as consultants, implementing their training experience by interviewing and designing behavioral programs. All cases handled were under the direct supervision of project staff, The paraprofessional interviewed the referral teacher, returned to the project staff for supervision on the case, then took the finalized program back to the teacher. From these field placements, data became available on the progress of the children for whom the behavioral programs were designed. Changes in target behaviors were obtained following consultation. This was Phase II.
- D. DATA FOR ANALYSIS The following types of data were of interest in evaluating the project:
 - (a) Screening or selection data: These involve data which could comprise important ways for selecting paraprofessionals if they are significantly associated with high performances in consultation. Such data include: Dogmatism Scale scores, scores on Edwards Personal Preference Schedule scales, applicants' ratings of elementary school teachers, and various ratings of students' performances on various tasks during the 60 hour training experiences.
 - (b) Effectiveness of Consultation data: These involve the actual effects of consultation—what behavioral changes occurred in the target children for whom consultation was provided? The screening and selection data analyses provide a means for identifying the means for selecting paraprofessionals to offer training. The behavioral change data tests whether the project was effective in developing useful consultants.

II. RESULTS:

A. THE SELECTION AND TRAINING OF PARAPROFESSIONALS - This section will present information on the selection of the paraprofessionals for training, and the training model used. The next section will present the data on measures which appear valuable as selection measures.

Acceptance of Candidates for Phase I Training. Of 34 students recommended by faculty for the program, 20 undergraduates were selected based upon in terview ratings. Each applicant was interviewed by the project director and one staff member, and ratings of from 1 (low acceptability) to 5 (highly acceptable) assigned. The sum of the two ratings was computed. The top twenty candidates were thus identified. Interview ratings were based upon interview evidence of ability to relate comfortably, spontancity, a balance between dominance and passivity, alertness, maturity, a meaningful interest in the program, some experience in dealing with people, and the lack of inappropriate mannerisms or overt display of anxiety or lack of confidence. Interviews averaged 30 minutes in length and were conducted in private offices. Although original project plans were to rely upon other items, such as the Dogmatism Scale, for decisionmaking in selection, it was decided that the interview would be given primary weight. This permitted later analyses of other items since this method insured a greater distribution of scores rather than a restricted range. Thus, Dogmatism Scale scores, Edwards scores, and ratings by the applicants of elementary school teachers were put aside for later analysis rather than used for screening or selection.

The distribution of ratings permitted the acceptance of only applicants with a total interview score of 7 or above. However, schedule conflicts led to two condidates withdrawing; their places were filled by two others whose scores were 6, after the staff reexamined and went through complete discussion of the remaining applicants. Of the final trainees for Phase I, 4 were majoring in Child Development, 2 in Education, 3 in Hearing and Speech, 2 in Occupational Therapy, and 9 in Psychology. Fifteen were women, 5 were men, 2 were from minority backgrounds. Eleven were seniors, 6 juniors, 2 sophomores, and 1 freshman.



Acceptance of Students for Phase II Training. Following completion of the 50 hours Phase I training program, 10 of the best students were offered field placement experiences. These students were selected on the basis of their performances during Phase I. Observed were their performances in understanding the concepts of interviewing, actual interviewing skill, conceptual grasp of behavior modification principles, and actual ability to design behavioral programs from cases provided in training. Interpersonal traits observed during the training were also observed, and evaluated, including evidences of maturity, motivation, ability to deal with others, and responsibility. Of the ten invited for Phase II, eight were able to participate.

The Training Model for Phase I. The training model was aimed at two major objectives: development of skills in behavior modification interviewing, and the development of skills in behavior modification program design. For each of these objectives, training was conceptualized as involving two phases: understanding and action. Thus, trainees were first exposed to a training experienced aimed at providing them with a cognitive grasp of principles. They were then given the opportunity to learn how to apply through action such principles. It was believed important that the trainees be able to both know and do; knowing without being able to translate knowledge into action, or doing without knowing the underlying principles, were both considered inadequate preparation for consultation. Another basic premise of the project was that undergraduate paraprofessionals could be trained as consultants. Consultation is conceived of as involving gathering of data through interviewing, and the delivery of advice based upon such data. Thus both interviewing skills, and program design skills were considered important in training. Since learning principles suggest that the acquisition of skills is best obtained through action, the training model emphasized continuous involvement in action-oriented experiences and deemphasized more passive experiences, such as lectures. Constant feedback was another characteristic of the training techniques. The training model is in Attachment D (also Table 1).

The training model included an experience in Meeting 1 in a brief interaction with one another partly for training, partly to obtain assessment data potentially valuable for selection. This aspect has not proven of value for either function.

TABLE 1 TRAINING HODEL

I. SCREENING

- A. Faculty references
- B. Application form, schedule scale of times
- C. Tests: Dogmatism EPPS
- D. Interview by two interviewers:
 Why should you be selected?', 'Why should you not be selected?'

II. INTERVIEW

- A. Pre-Session: Ss given first 11 excerpts and asked to type replies on ditto for distribution
- B. Meeting 1 (3 hours): Understanding Interviewing
- 30 min.
- 1. Introduction, Structure to program
- 30 min.
- 2. Observational Task
 - a. Pass out rating items -- purpose is to aid in determining training needs, e.g., observational skills and ability to obtain information quickly
 - b. Ss and observers fill in items

- 15 min.
- 3. Break
- 45 min.
- 4. Feedback
- 60 min.
- 5. Begin training in Discrimination using rules and excerpts with pre-set responses; instruct Ss to score remainder at home before next meeting
- C. Meeting 2 (3 hours): Understanding Interviewing --Continuation of Discrimination
- D. Meeting 3 (3 hours): Understanding Interviewing
- 60 min.
- 1. Continuation of Discriminati
- 60 min.
- 2. Return Ss' own responses to the 11 excerpts and have them score (instructor has scored these on his own key)
- 3. Have Ss suggest better responses to the 11 excerpts. Assign new 11 excerpts for takehome to write new responses based on their learning.



- E. Meeting 4 (3 hours): Interviewing Skills
- 75 min.

 1. Base line data: Ss rotate roles of interviewer -interviewee about 4-5' each (roles pre-assigned
 as vocational); Ss not to reveal or discuss details
 of roles. Videotaped.
- 60 min. 2. Lecture on interviewing using handout.
- 45 min. 3. Feedback from videotape for about 3 Ss.
 - F. Meeting 5 (3 hours): Interviewing Skills, Simple
- 26 min. 1. Feedback continuation for remaining Ss.
- 4 min.

 2. Attending and Hearing: Emphasis on being a "receiver". Videotaped.
 - a. Relaxed posture, eye contact, verbal/non-verbal responses all important.
 - b. One student-attending and one student-interviewee.
 - c. Attending student does 2 minutes of the best he can, then suddenly switches to the worse.
- 30 min. 3. Playback Attending Behavior videotape and discuss.
 - 4. Responding Training:
 - a. All Ss are randomly given an Interview Style from the following -- Passive Response, Tangential Response, Changing Response, Narrowing Response, Empathy Response, Rapport Building Response. Styles are used for 2 minute interview.
 - Ss also role play pre-assigned roles for the Response Style Interviewer. Interaction is videotaped. NOTE: roles are not to be revealed.
 - c. Discussion using the videotape. Ss encouraged to discuss their ability to control their interviewing style and their reactions.
- 24 min. 5. Summary of Interviewing Experiences to date.
 - G. Meeting 6 (3 hours): Interviewing Skills, Complex
- 20 min.

 1. Roles reassigned and videotaped consecutively.

 Interviewers are to use the most appropriate
 interviewing style for the interviewee roles



H. Meeting 7 (3 hours): Interviewing Skills, Complex

90 min.

 Lecture--demonstration on sequential memory, alternative hypotheses-formation, source of conclusions (direct observation, inferences, or bias).

90 min.

2. Role-playing with didactic interruption. Ss are interrupted and encouraged to deal with memory, hypothesis-formation, or drawing conclusions, based on the interview.

III. BEHAVIOR MODIFICATION

A. Meeting 8 (3 hours): Understanding Behavior Modification

90 min.

1. Lecture on Basic Principles. Encourage Ss to participate through examples.

90 min.

2. Assign readings and journal articles to abstract. Explain abstracting and goals.

B. Meeting 9 (3 hours): Understanding Behavior Modification

60 min.

- 1. Using cases from Ss' experience or from case resource file:
 - a. Identify relevant and irrelevant information.
 Have Ss justify their positions in writing.
 - b. Present additional information based on os questions. Have Ss further discuss the relevancy of the questions and answers.
 - c. Continue procedure of questions, justification of questions, categorizing of questions' relevancy, answers, categorizing the value of the answers, etc.

120 min.

- 2. Written Test.
- C. Meeting 10 (3 hours): Understanding Behavior Modification

60 min.

1. Review Abstracts. Focus is on identifying reinforcers. method, cause, etc.

120 min.

- 2. Continuation with case discussion approach to classify relevancy of information.
- D. Meetings 11 to 16 (3 hours each): Behavioral Programming

180 min.

Subjects are given behavioral programs to design from cases actually presented to them. Programs are discussed for simplicity, feasibility, and appropriateness.

E. Meeting 17 (variable): Interviewing for Behavior Modification

Subjects interview a "live" client for 30 to 60 minutes, then design a program for that client. Session is audio taped and used with the written program for review and evaluation



Phase I Training. The training program is outlined in Table 1. Trainees met for a total of ten training meetings, with each meeting being for three hours duration. Table 1 summarizes the topics for each meeting and indicates the number of minutes allocated for each topic. Some important facets deserve special note:

(a) Meeting 1 -

- (1) Trainees were given the instruction to interact together and to be prepared to rate one another on certain traits. These traits as listed on a rating form (Attachment D-1) were discussed with them beforehand. This task aimed at (a) providing the staff with added assessment data, and (b) initiating the first steps towards interviewing.
- (2) Training in interviewing skills first emphasized understanding. This was achieved through "Discrimination skills" training. Discrimination was believed by Carkhuff to be a critical variable in counseling interviews. He has devised a series of client statements (excerpts) which can be typical of client-counselor interactions. He also has a system for rating or scoring the adequacy of any counselor's replies to these excerpts. Learning such a rating scheme provides a counselor-trainee with a cognitive understanding of the differing types of counselor responses.

Although the project staff concluded that the Carkhuff scoring approach and excerpts were inappropriate for behavior modification consultation, the general format was considered valuable. Hence, the staff developed behavior modification interview excerpts and a behavior modification scoring technique (Attachment D-2). Prior to meeting 1, 11 excerpts were mailed to the trainees without special instructions except to write out how they would reply to the client's statements; these excerpts were typical remarks often made by interviewees to behavior modification consultants, and were written from the staff members' personal experiences with consultation. This exercise served to identify the trainees level of interviewing skill, and was to later be used in further training. The trainees were almost unanimously poor in their responses, relying heavily upon traditional psychological or didactic comments.

1. Carkhuff, R. Helping and Human Relations. New York: Holt, Rinehart, & Winston, 1969.

During meeting 1, trainees were taught the rules for scoring excerpts, then given a set of 22 excerpts containing an interviewee response and several possible counselor-consultant replies. The trainees actually scored these replies, then compared their scoring with the staff member assigned to their training. The staff trainer explained the rationale for his scoring where necessary. Trainers received an "instructor's key" which contained pertinent information to standardize the trainers' approach to scoring of these excerpts (Attachment 3). The trainee's copy of these excerpts involved 46 excerpts each with several consultant replies. These excerpts were used across several hours of training to insure that the trainees had enough experience in discrimination skills. These excerpts are found as AttachmentD-4.

(b) Meeting 3 -

- (1) Discrimination training was continued, using the 46 excerpts begun in Meeting 1.
- (2) Trainees were also given back the responses which they wrote to 11 excerpts prior to Meeting 1. By having them score their own responses, the trainees were able to become more aware of their shortcomings in designing appropriate replies; this experience increased the meaningfulness of the discrimination training, and increased the trainees' motivation.

Later in this meeting, trainees were asked to suggest better responses to the 11 excerpts. Thus, they were given actual experience in emitting correct responses to the excerpts now that they were aware of the rules comprising correct counsultant replies. This action step was the intermediate training step in between understanding of what is correct and actually spontaneously giving the correct response to an interviewee in a live interview.

Following discussion and development of correct responses to the original 11 excerpts, the trainees were given 11 more excerpts (Attachment D5) to compose consultant responses.

(c) Meeting 4 -

- (1) Following the discrimination training to develop a cognitive understanding of counseling interviews, session 4 was aimed at providing the first controlled exposure to action. Trainees were divided into interviewer and interviewee roles with the interviews videotaped for microcounseling feedback. Each interviewer attempted to apply the principles learned by discrimination training.
- (2) The immediate videotape replay permitted the interviewer trainee to become aware of his ability. The staff members' comments took into account the "cosmetic" phenomenon, i.e., the fact that the trainee is more attentive to the shock of seeing and hearing himself for the first time, and less aware and receptive to learning interviewing responses.

(d) Meeting 5 -

- (1) Feedback sessions for the remaining trainees doing interviewing were continued.
- (2) One trainee was privately instructed to display Attending and Hearing skills (Attachment D-6) as an interviewer, then to switch after two minutes and display the worse. This videotape was then discussed with the rest of the trainees. The contrast effect between good attending style and poor was found to have real impact on the rest of the trainees who had not known what to expect.
- (3) Trainees were then randomly assigned an interviewer role (Attachment D7)to be used in their next interview for videotaping. Pre-assigned interviewee roles were also provided for use whenever a trainee was interviewed (Attachment D7). The purpose of this exercise was to provide each trainee with intervew experiences where he relied upon one interview response style. This was designed to give the trainee confidence in his ability to control his own responses in interviewing. Additionally, since the interviewer style did not always match the roles played by the interviewee during the interview, the replay of the



outcome of the interaction provided a means of demonstrating the importance of the interviewer adapting his responses to what is needed by the interviewee to facilitate the interview.

(e) Meeting 6 -

- (1) Trainees were given another opportunity to interview, this time with the aim of using interview responses appropriate for the facilitation of the interview. The previous meeting demonstrated (a) that the trainees had the capability of controlling the interviewer responses they emitted during an interview, and (b) that the rigid reliance upon only one type of interviewer response was not useful in interviews. Meeting 6 encouraged the trainees to control their interviewer responses, using whichever responses appeared appropriate for helping the interview process, changing their responses as the situation demanded. Since the response styles coincided with the traits discussed and scored in discrimination training (e.g., narrowing) the exercise provided an integrative experience in interview training.
- (2) Videotape replay was again relied upon to enhance the learning experience.

(f) Meeting 7 -

(1) The previous meetings were aimed at providing the trainees with experience in the fundamentals of interviewing, assuming that none of the trainees had any previous training. Meeting 7 was aimed at providing them with training in the more complex aspects of interviewing, such as the use of memory regarding the sequence of interaction to form or reject hypotheses reagrding the interaction. A lecture-demonstration was conducted for the start of this training. First, two trainees were asked to conduct an interview in the presence of the other trainees as observers. Then, the principal investigator lectured briefly on complex interview skills. Next, he led the trainees in a discussion of what they observed in the interview, focussing on having the trainees make hypotheses, defend these, remember interactions, etc.



Finally, the principal investigator would confirm or disconfirm the trainees' hypotheses or observations with his own, giving specific reasons and examples.

(2) The trainees were then are in prived off into interviewer—
viewed dyads and instructed to fingin interviewing.

During these interview interactions, the trainees were interrupted at various points. The interviewer and the observer trainees were then asked to formulate hypotheses about the interviewee and the problem being presented by the interviewee. This experience was aimed at helping and encouraging the frainces to not only interview appropriately (by selecting the right response style), but also to continuously think about what was happening in the interaction.

(g) Meeting 8 -

(1) This meeting initiated training in behavior modification principles. The staff lectured on basic principles, and assigned two books to read:

Meacham, M. & Wiesen, A., Changing classroom behavior, Scranton, Pa.: International Textbook Co., 1969.

Deibert, A. & Harmon, A., New tools for changing behavior, Champaign, Ill.: Research Press.

These books were selected after careful screening of many others since they provided theoretical material, applied material, a programmed approach, cases relevant to child management, a style appropriate to the level of education and experience of the trainees.

(2) To further increase the knowledge of the trainees, they were given the assignment of reading and abstracting technique articles from journals relevant to operant programs. The aim was to increase their awareness of differing behavioral programs designed to deal with differing child management problems. The emphasis was on technique, rather than on adequacy of the research design.

(h) Meeting 9 -

- (1) To promote an understanding of behavior modification, trainees were presented with descriptions of cases derived from the principal investigator's files. Trainees were to classify the differing information provided with the case as "relevant" or "irrelevant" for behavioral program planning. Additionally, the trainees were to write down: their justifications.
- (2) Following discussion of the trainmes' original decisions, additional information was provided about the cases based upon the questions asked by the trainees. Again, trainees classified the value of the information, classified the value of their questions, and justified their decisions.
- (3) A written test, generally based agon material from the books assigned, was given at the end of this meeting.

(i) Weetings 11 to 16 -

- Trainees were asked to design beliavior modification programs for the cases presented. Programs were compared and discussed regarding effectiveness, feasibility, simplicity, etc.
- (2) Whereas the aim of meetings 9 and 10 was to make the transition from imperviewing alome to thinking about interviewing for behavior modification cases, meetings 11 to 16 were aimed at training in program design and not interviewing.

(j) Meeting 17 -

- (1) This meeting was aimed at a complete integration of interview skills (cognitive and action) and behavior modification skills (cognitive and action). Additionally it was aimed at providing the trainees with a "live" experience. Volumer interviewees from the Psychology Department were invited to be interviewed. Trainees then conducted a behavior modification interview, and them designed a program of child management based upon whear interview.
- (2) The interview was videotaped, and reviewed along with the behavior modification programs designed by the trainees.



B. ANALYSES OF SELECTION MEASURES - This section will present the results of analyses of the ability of various scales to predict success in training or consultation.

The Criteria for Evaluation. Three sets of criteria were used in analyzing material potentially useful as means for selecting paraprofessionals for training. The first criterion was the judgments by the project staff from the screening interviews regarding which students seemed acceptable for training and which appeared not acceptable. By comparing the mean scores on scales, such as the Dogmatism Scale and other scales, it would be possible to determine whether such scales could have predicted the acceptability of a candidate. Table 2 summarizes the results.

TABLE 2

MEAN SCORES OF SUBJECTS ACCEPTED OR REJECTED FOR TRAINING

Scale	Accepted Ss Mean	Rejected Ss Mean
Dogmatism Scale	120.31	122.82
Elementary Teachers (Ratings by Ss)	13.20	11.73
Edwards Scales: Achievement Deference Order Exhibitionism Autonomy Affiliation Introception Succorance Dominance Abasement Nurturance Change	59.32 45.89 38.74 30.68 65.00 59.16 78.16 44.58 50.26 43.47 63.32 66.68	49.00 52.64 33.73 40.82 52.73 60.00 75.18 57.73 59.09 44.36 71.55 72.64
Endurance Heterosexuality Aggression	50.74 51.89 46.84	44.91 38.64 45.82



From the results of Table 2, some trends appear worth brief mention. Those acceptable for training, when compared with those rejected, appear to be higher in achievement orientation, autonomy, andurance, and interest in the opposite sex, but lower in deference, exhibitionism, the need to help others or be helped by others, dominance, or the desire to travel for new experiences. Since the scores on the Edwards scale are reported in terms of percentiles, such scores also represent the standing of the subjects relative to a normal, unselect sample. With this frame of reference, the accepted subjects seem to be above average in introspection (78th percentile), but well within the average range on all other traits. Higher scores were found on achievement (59th percentile), autonomy (65th percentile), affiliation (59th percentile), need to help others (63rd percentile), and interest in travel and new things (67th percentile). As was mentioned earlier, it was theoretically anticipated that a successful consultant should be open minded, and would have moderate levels of autonomy and dominance, but low levels of deference and abasement. The actual data is encouraging, but not entirely in suport inasmuch as the Dogmatism measure of open mindedness did not differentiate the groups.

This analysis by comparing means of accepted and rejected subjects is useful only as a preliminary analysis. The criterion has some justification; however, the more critical criteria are those which are based upon actual observations of performance on consultation tasks. Hence the next two criteria were analysed in greater depth.

The second and third criteria were ratings obtained at the end of the Phase II field placement experience. By this time, project staff had several months direct observational contact with the 20 students who completed Phase I training and the 8 who completed field placements. Based upon this, a second criterion was developed: the project staff ranked all participants on the basis of staff impressions of the students' performances. Staff rankings were pooled to give a final ranking. From these rankings, the students were assigned to one of three groups: Highly impressive performance in training and consultation (High Group), Moderately impressive (Middle Group), Unimpressive (Low Group).



Those placements basically represented the staff members' answers to the question: Given all the information you have now on the trainees, including their knowledge of interviewing and behavioral principles, and their actual ability to interview and design programs, how good a consultant in behavior modification is the trainee? Thus, the High Group were considered well qualified as consultants, the Middle Group were acceptable but probably would experience some minor problems in consultation work, while the Low Group were considered ones who would not be recommended for consultation work. For purposes of statistical analyses, the High Group, the Low Group, and the group of subjects who were rejected for any training by the original screening interviews (Reject Group), were compared. Two scales reached significance: the Edwards Succorance scale (analysis of variance, F = 5.59, .01 level of significance), and the Edwards Endurance scale (F = 3.55, .05 level of significance). For Succorance (the need to be helped), the High Group scored at the 46 percentile, the Low Group at the 23 percentile, and the Rejected Group at the 58 percentile. On the Endurance scale, the High Group scored at the 54 percentile, the Low Group at the 78 percentile, and the Rejected Group at the 45 percentile. In both cases, the Low Group's scores contributed to the significance in being very low on the need to seek help and advice (Succorance) and very high on perseverence with a task (Endurance). It will be recalled that the Rejected Group were rejected on different criteria than the Low Group. It is possible that their test score similarities to the High Group indicates that they might have been more responsive to training than the Low Group. Again, Dogmatism scores, and the trainees ratings of elementary teachers did not differentiate groups.

The second criterion involved the project staff's rankings of the trainees based upon performance. In the same way, the third criterion involved ratings of performances of the field placed students by the teachers in the community. Each teacher who had some contact with one of the eight student-consultants placed in their agency was asked to rate the student (Attachment E). These ratings were summed to provide a total rating for each consultant. This type of data represents a limited range of



scores since they were available only after several other trainees had been screened out. However, the data is still valuable inasmuch as such information reflects a judgment on performance as seen by the teachers using the service. The question of interest was: Given the teachers' evaluation of performance of the paraprofessional consultants on real-life cases, which scales predict successful performance? To obtain this information in a usable fashion, a stepwise multiple regression formula was calculated with the teacher ratings as the dependent variable and the screening scales as the independent or predictor variables. This statistical procedure determines which predictor variable accounts for the greatest amount of variance in the dependent variable and calculates the value of the correlation. It then adds the next most important predictor variable, calculating the multiple regression based upon these two predictor variables. The analysis proceeds in this manner until the addition or identification of additional variables does not add anything significant in the way of predicting the dependent variable. Using the teachers' ratings of performance as the dependent variable, the results were in the following order:

Most important predictor: Dominance Multiple r: .85

Next predictor variable: Written test on behavior

modification principles

Multiple r: .94

Next predictor variable: Ratings of elementary

teachers by paraprofessional

Multiple r: .995

Next predictor variable : Performance in classroom

communications skills

Multiple r: .999

Final predictor variable: Performance in classroom

on behavior program design

Multiple r: 1.00

The above statistics indicate that scores on the Dominance scale and on a short test of behavior modification principles given during Phase I accounted for the



greatest amount of the variance in the dependent variable. In other words, 72 percent of the dependent variable's variance could be predicted by knowing only the Dominance score. Adding knowledge of the paraprofessional's performance on a written test on behavior modification adds enough to account for 88 percent of the variance; it should be noted, however, that the behavior modification test contributes much less to the prediction than the Dominance score does alone. Thus, the single most useful predictor or selection measure seems to be the Dominance scale. Upon inspection of the data, it appears that this scale is negatively or inversely related to the criterion. Thus, low scores (e.g., the 23rd percentile) were associated with higher ratings by the teachers. Put in another way, teachers who use paraprofessional consultants seem to be more pleased with those consultants who have very little need to dominate.

With the possibility that the teacher ratings of performance may not be identical with the staff ratings of performance, these two criterion measures were correlated. The result was a correlation of only .27. This indicates that the project staff were judging the paraprofessional students' performances on different criteria or bases than that used by the teachers. It is difficult to know which judgments are the more useful, the project staff's or the teacher's. The project staff might be said to be judging on the basis of professional behavior modification experts, perhaps looking at such variables as the adequacy of the behavior modification programs developed, the level of understanding, the quickness to learn to apply principles, and the ability of the student to function without further supervision. On the other hand, the teachers saw two facets of the paraprofessional: the interviewing skill during initial contact, and the final behavioral program product. It will be recalled that the behavioral program was never designed on the spot; rather the student brought the information from the interview and worked on the program design under the supervision and direction of the project staff. Thus, the teachers may have been responding more to the quality of the paraprofessionals interviewing skills, perhaps weighing such factors as comfort, confidence level, interest expressed, empathy.

Whatever were the differences between the qualities sought by the project staff versus those rated by the teachers, the low correlation led to the reanalysis of the data. The multiple regression procedure was again used, leading to thefollowing:

Most important predictor: Performance in class

in Conducting an

Interview

Multiple r: .91

Next predictor variable : Dogmatism Scale

Multiple r: .97

Next predictor variable : Edwards Change

Multiple r: .995

Next predictor variable : Succorance

Multiple r : .999

Final predictor variable: Aggression

Multiple r: 1.00

Again, a single variable seems to be accounting for the majority of the variance in the dependent variable, the paraprofessionals' ability to interview as demonstrated by performance on a classroom task. Although accounting for only a very small portion of the variance, the Aggression scale should be mentioned to clarify its contribution. As with the Dominance scale, the Aggression scale is inversely associated with high ratings of performance.

Conclusions Regarding Selection. Some very tentative conclusions may be drawn from the aforementioned statistical results. It would appear that paraprofessional candidates for training and placement might be screened in accord with the following personality profile: high achievement and autonomy characteristics, somewhere within the 60 to 70th percentile on the Edwards Personal Preference Schedule norms, and low needs to dominate or to be aggressive. Direct observations of the trainee during training can provide valuable selection information, particularly the demonstrated ability to conduct interviews. The data on performances on written behavior modification tests, performance on communication skills (the ability to take a written

interviewee statement and construct an appropriate response in writing), and performance in designing behavioral programs from case historics presented in class, appear to be important in some way. It is likely that the proper interpretation of this latter data is in pointing out the importance of such experiences as a necessary part of training, rather than as a useful set of predictor or selection scores. Because of the apparent differences among the criterion measures, these conclusions should be viewed with caution. However, the results are encouraging, especially because they are consistent with the theoretical premises about what traits and training should be valuable in paraprofessional consultation.

C. DATA ON THE EFFECTIVENESS OF PARAPROFESSIONALS - This section will discuss material on the basic issue as to whether paraprofessionals can work effectively as consultants. In addition, the information also answers the question as to whether the training model prepared the paraprofessionals properly for their duties as consultants. Funadmentally, the premise is that the program can be evaluated by examining the effects of the consultation. If paraprofessionals can work as consultants, and if the program trained them properly, then changes should be observable in the target behaviors of the cases the paraprofessionals worked with during the field placements. In a sense, such information also reflects the value of behavior modification programs in effecting change, and represents a test as to who ther teachers are capable of implementing programs provided them by paraprofessional consultants.

In the field placement, paraprofessional consultants were placed in the following agencies:

Headstart, Greeley

United Day Care Center

Jack and Jill Day Care Center

Colorado State University Preschool

Colorado State University Hearing and Speech Clinic



Consultation was provided on 23 cases, 21 of which were aimed at behavioral changes in individual clients, with the remaining two being aimed at helping the teacher to manage an entire classroom ('How to control a classroom of children without having to yell to get attention and maintain order'). Useable data was available on 21 of the consultation cases. Improvement in the desired target behaviors were found in 18 of the 21 cases, no change in 3, and no cases showed the target behaviors becoming worse following consultation. Target behaviors involved aggressive or disruptive behaviors, short attention spans, poor social interactions, inability to follow directions, expressive speech, comprehension, and classroom management. Table 3 summarizes information on these cases.

TABLE 3

CASE SUMMARIES ON CONSULTATION

Case	Age	Problem	Status of Case	Comments
Lewis	4	Disruptive	Improved	Program terminated by death in family.
Dawn	3	Disruptive	No Data	-,,, ·
Roy	6	Agression	Improved	Two programs used
Roy	6	Poor peer relations	Improved	simultaneously.
Denise	5	Nonpartici- pant in activities	${ t Improved}$	
Scott		Hits girls	Improved	Now also more relaxed in school.
Robby	4	Disruptive	Improved	Two simultaneous
Robby	4	Attention span	Improved	programs. Effects generalized to home
Scotty	5	Peer relations	No change	Improvement then relapse.
Chris	5	Peer relations	No change	Improvement, relapse.
Brian	5	Hitting	Improvement	Relaxed at home; also now likes school.
Vickie	. 5	Disruptive	No Data	

TABLE 3 (Continued) CASE SUMMARIES ON CONSULTATION

Case	Age	Problem	Status of Case	Comments
Julia	5	Disruptive	Improved	Behavior terminated before program tried.
Vickie S.	5	Disruptive	Improved	Behavior terminated before program.
Tommy	4	Hyperactive	Improved	
Tommy L.	5	Attention span short	Improved	
Susie	5	Ignores directions	Improved	Social interactions also improved.
Miguel	3	Hitting	Improved	
Gary	5	Disruptive during speech Rx	Improved	Social interactions improved; speech much improved.
James	28	Verbalize word	Improved	
James	28	Learn concept "on-off"	Improved	
Class A		Teacher has to yell	Improved	Program consistently used by teacher.
Class B		Teacher has	No change	Program inconsistently used by teacher.

A more detailed picture of the types of improvements gained through the teachers' implementation of behavioral programs provided by the paraprofessional consultants can be seen by individual case reports. In the field placements, the paraprofessional students visited one to two hours with the referral teacher, then left to return to the university where the consultant independently designed a behavioral program. This program was reviewed by project staff, discussed, approved. The consultant then went back to the teacher, discussed the program, and left the teacher with a written step-by-step statement of the program. Teachers were also shown how to obtain base-line observational data before use of the program for comparison with daily data during program implementation. The following seven cases are representative examples of the results of paraprofessional consultation:

Brian, age 5, was a problem in preschool because he hit, push, shoved other children.



Brian's aggressive behaviors did not seem stimulated by any specific circumstances, such as frustration. His reputation for being a troublemaker was such that other children soon blamed him for any problems occurring in the preschool. The consultant relied upon principles of extinction, timeout, and the reinforcement of acceptable behaviors through both verbal praise and positive activities. Within a week of implementation of the program, Brian's aggressive behaviors decreased from a high of 10 per day, to two, and to one by the eighth day (see Figure 1).

Gary, age 5, was making poor progress in speech therapy because of his disruptive behaviors which were out of the control of his therapist. He is a non-verbal child, with apparently a limited understanding of words speken to him. Consultation was aimed at decreasing his disruptive behaviors through increasing his attending behaviors. On the first day of implementation of the behavioral program, Gary's disruptive behaviors dropped from a high point of 15 per session to zero. There was a brief return of these behaviors the next therapy session, but the frequency was less than half of that shown previously, and disruptions decreased to zero again within three meetings (see Figure 2).

Robby, age 4, has reacted to instructions to do things by becoming disruptive. He was observed to follow only about 50 percent of the requests made of him, that is, there was only a 50-50 chance that he would be relied upon to do as asked. Stars on a chart and time-outs were combined in the program, leading to an increase of following instructions of 90 percent of the time. In addition, instructions by the teacher to Robby were increased in complexity; thus, he was not only responding consistently to directions, but to more difficult directions (see Figure 3). The effects of the program used in the day care center were reported as also having generalized to the home setting.

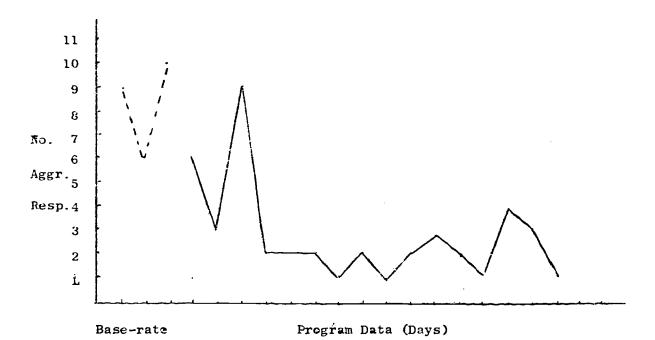


FIGURE 1 : Decrease in Aggressive Behaviors Per Day (Brian)

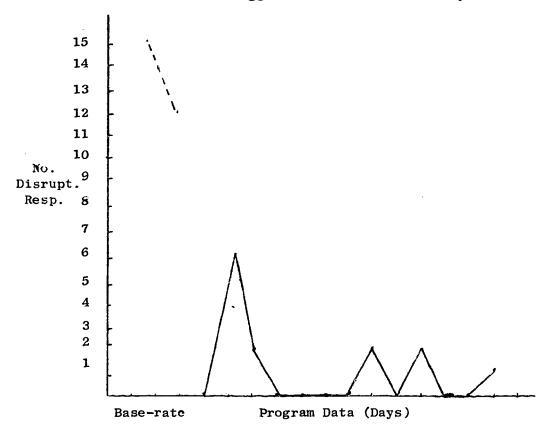


FIGURE 2: Decrease in Disruptions Per Day (Gary)



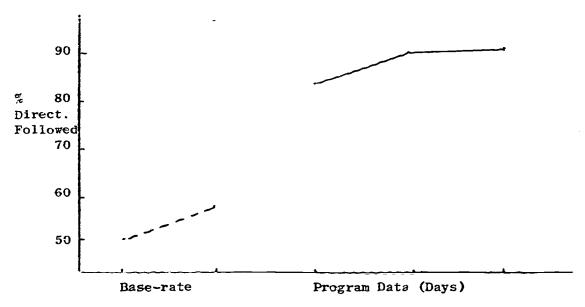


FIGURE 3: Increase in Percent of Directions Followed per Day (Robby)

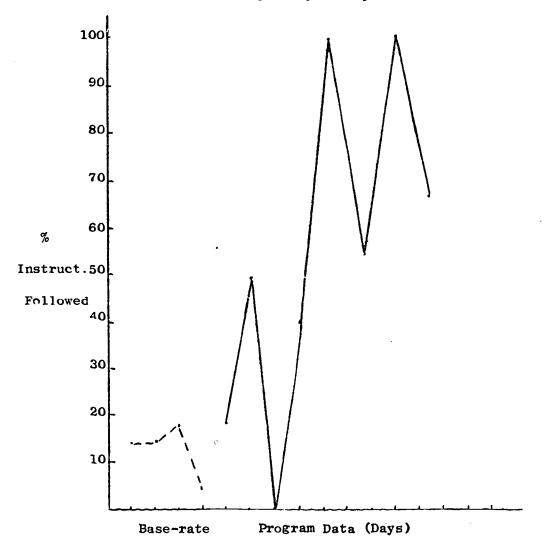


FIGURE 4: Increase in Percentage of Instructions
Correctly Followed (Susie)

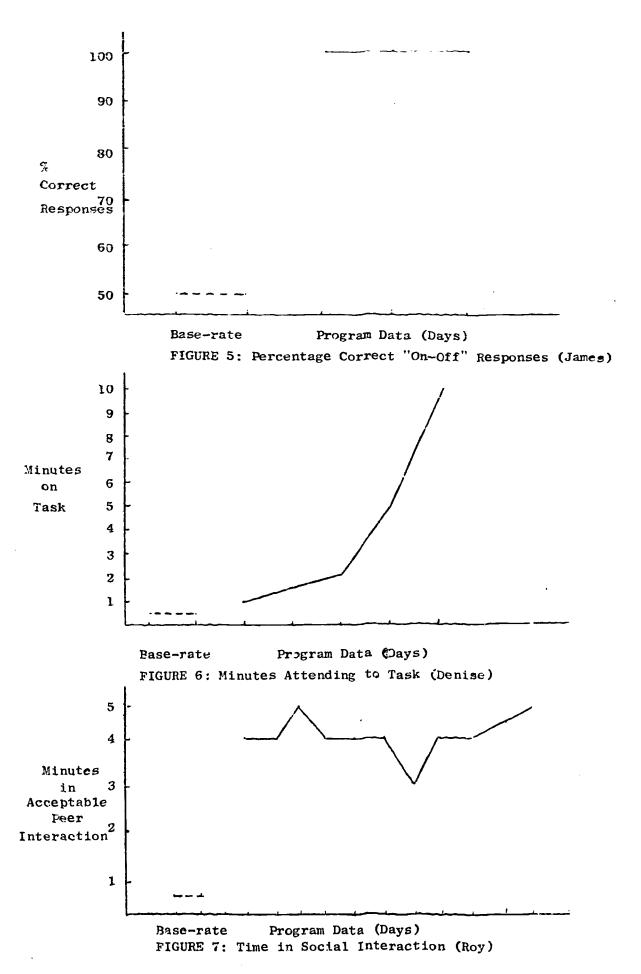


Susie, age 5, in a Headstart program either ignored instructions, followed them for a brief span before returning to her previous actions, or showed disruptive behaviors when given directions. During base-rate observations, her best performance in terms of percentage of time she responded to an instruction correctly was only 17 percent. The behavioral program relied upon time-out, witholding attention, and rewards such as verbal praise and hugs or a food treat. With some variability, Susie's performance has improved above the base-rate level (see Figure 4), showing the ability to respond as high as 100 percent of the time. Teachers report that Susie's social interactions have also improved following consultation.

James, 28, is a blind retarded client in the speech and hearing clinic. The goal of the therapist for the consultant was to design a means of teaching him the simple concept of "on-off" since this is important for everyday adjustment (e.g., 'Place this on the table'). From a 50 percent correct base-rate, his performance increased to 100 percent correct after implementation of the program (see Figure 5). This improvement occurred on the first day of use of the program.

Denise, age 5, participates only in certain activities which she wants, such as motor games. Although the day care center staff considers it valuable for her to learn coloring and cutting, Denise will not participate in these activities. Starting from a base-rate of 30 seconds, Denise's participation showed a gradual steady increase to ten minutes following the behavioral program. (See figure 6).

Roy, age 6, did not interact with peers in an acceptable manner, but was disruptive rather than cooperative, and aggressive. The program was designed to help him not only spend more time in peer relations, but in acceptable behaviors in peer relations. Verbal praise and time-out helped raise his acceptable interaction times from 30 seconds to four-five minutes (Figure 7).





III. CONCLUSIONS AND RECOMMENDATIONS:

The project has achieved three major objectives -

- (a) The development of a selection and training model implementable by other training institutions.
- (b) The identification of tentative screening measures helpful in the identification of trainees suitable for behavior modification consultation training.
- (c) The demonstration that the training program can develop paraprofessional undergraduates as consultants to teachers.

The most critical contribution of this project was the clear demonstration that undergraduates, without in-depth backgrounds in psychology, can be trained in helping-consultation endeavors. The training model used emphasizes a limited goal: that of developing skills in behavior modification interviewing and consultation via program design. It has developed a model of interviewing training especially designed for behavior modification interviewing, a unique objective. In this respect it is a model complementary to the type of model used by Carkhuff in training for helping relations interviewing; however, the Carkhuff model is felt to be unsuitable for behavior modification work of the type in this project. The project's training procedures may be implemented by others, given a background in behavior modification work. Currently, the training model is being extended, using the trained paraprofessionals to train other paraprofessionals.

It should be noted that the consultation program, and the training model, were directed at the use of operant behavioral techniques. The field of behavior modification also has other procedures, such as desensitization, anxiety management training, aversive training. It is the project director's belief that the operant approach, with its associated techniques (extinction, time out, shaping, etc.), is the most promising for dealing with a majority of the problems in day care centers, preschools, and elementary schools. Furthermore, the operant approach can be most readily transmitted on a consultation basis.



The data on the screening measures have clarified some aspects of training, but raised new questions in others. There was confirmation of the theoretical expectation that successful paraprofessional consultants should show moderate autonomy and low needs to dominate. Data also added the importance of moderate achievement drive (possibly as it affects the desire to learn) and low aggressiveness. Certain aspects of the training experiences were also helpful to some degree in predicting success, such as knowledge of behavioral principles, the ability to conduct an interview, communication skills, and program design. All of these latter activities were an integral part of the training itself, that is, for example, the trainees had been trained in interviewing prior to being required to make a trial run at conducting an interview in Meeting 6. Thus their performance was a reflection of how well they learned from their training. In effect, the selection for consultation placement should therefore be a function of examination of characteristics shown by the trainee applicant before training, as well as the level of achievement shown by those applicants completing training. Training and selection are not completely isolated activities; selection and evaluation must continue to be used during training itself.

A major aspect of selection raised by the project data is the discrepancy between criteria used by project staff and that used by the teachers who relied upon the paraprofessionals for help. The ratings by project staff correlated only .27 with those by the teachers. This is only partially explained by the limited range of the scores. More likely, there are different criteria being used by the two sets of judges. If teacher satisfaction with the consultant is important, then the data suggests that paraprofessionals should be selected with low Dominance scores on the Edwards Personal Preference Schedule. If the project staff's satisfaction is used as the reference point, then paraprofessionals should be placed upon the basis of their performance in the interview task in Meeting 6 of the training sessions. It must be quickly pointed out that these distinctions become less important when the outcome of the consultations were examined. Of the 21 cases with data on the effects of the paraprofessional consultation contacts, only three showed no improvements following consultation. Basically,



this means that the consultants were generally effective in accomplishing the task for which they were trained, to help teachers effect desired changes in children with problem behaviors.

Several recommendations should be reviewed by others who plan on use of the training model:

(a) Screening and selection are important.
Indiscriminate admittance of any applicant to training runs the risk of producing poor consultants who may attempt to offer their services to an unwary public. Behavior modification has proven itself to be a powerful tool in effecting change, both for good and bad. An incompetent 'expert' can adversely affect a child, but escape blame by claiming that the behavioral program was at fault. With the demands for behavioral personnel, and the popularity of behavior modification techniques, careful measures must be taken to avoid misuse.

It is the belief of the project director that training should not be offered to persons with any of the following: an inability to understand the underlying principles of behavior modification, an attitude of inflexibility or unwillingness to seek advice, a dogmatic belief that programs can be designed without accurate concrete information, an inability to translate psychodynamic terms or concepts into concrete and observable behaviors, an inability to translate theory into application, a lack of ability to listen and help others to provide concrete information through asking the appropriate questions. Certain personality traits contribute to poor consultation: interpersonal tension or anxiety, extreme dominance and talkativeness, extreme passivity or deference, irresponsibility, lack of maturity, flightiness of thoughts.

It is of interest to note that a background in psychology is not needed for training in consultation in behavior modification. In fact, one trainee was refused placement in the Phase II part of the program because project staff felt he could not grasp the behavioral principles;



this deficiency was attributed to an extensive background in psychodynanic terms and work. He could only conceptualize cases in terms such as 'conflict, unconscious motivation, identification, frustration tolerance, dependency needs,' and so forth, and could not obtain the types of concrete information needed to design behavioral programs.

(b) Two changes in the training model seem valuable. The observational task in Meeting 1 did not provide either helpful screening information or training. It was felt to be stressful by the trainees as well.

The three hour time span for each training session should either be broken with a rest period after the second hour, or should be reduced to two-and-a-half hours.

- (c) At the start of the field placement, the project director discussed the general ideas about behavior modification and its use with agency staff, where possible. This was found to be a valuable means of helping referral teachers in better using the consultation services. Where programs were not maximally effective, part of the problem was in the inconsistent use of the behavioral techniques by the teachers.
- (d) Obtaining base-rate data and follow-up is crucial. This provides information on whether the target problem is real, the factors associated with the problem, and the effects of the program. Changes in programs may be needed and can be determined by the data.
- (e) Consultants should be made aware of the needs and characteristics of the referral teachers. Those teachers who are distinctly interested in fostering growth and change in their children respond well. Those who see the



behavior modification consultation as an easy way of 'baby-sitting' their charges may be less dependable in implementing programs.

- (f) Consultants might first examine the referral setting to determine whether classroom management directed at the entire class is needed. Occassionally the teacher requests help for one child, but is unable to devote the needed attention for program implementation because the class as a whole is disruptive. Programs which help to first control the classroom may have to be given first priority.
- (g) The training model can be readily adapted to summer institute or summer coursework structures. It is critical that Phase I training be followed by Phase II field experiences for those trainees who intend to actually function as consultants. Although the Phase I training provides intensive action-oriented experiences, there is very little substitute for the reality of an on-the-job exposure.

REFERENCES

- Bandura, A. Principles of behavior modification. New York: Holt, Rinehart, and Winston, 1969.
- Carkhuff, R., & Truzx, C. Lay mental health counseling. Journal of Consulting Psychology, 1965, 29, 425-431.
- Cowen, E., Leibowitz, Ellen, & Leibowitz, G. Utilization of retired people as mental health aides with children. American Journal of Orthopsychiatry, 1968, 38, 900-909.
- Franks, C. Behavior therapy. New York: McGraw-Hill, 1969.
- Greenblatt, M., & Kantor, D. Student volunteer movement and the manpower shortage. American Journal of Psychiatry, 1962, 118, 809-814.
- Hallowitz, E., & Riessman, F. The role of the indigenous nonprofessional in a community mental health neighborhood service center program.

 American Journal of Orthopsychiatry, 1967, 37, 766-778.
- Mira, Mary. Results of a behavior modification training program for parents and teachers. Behaviour Research and Therapy, 1970, 8, 309-312.
- Poser, E. The effect of therapists' training on group therapeutic outcome. Journal of Consulting Psychology, 1966, 30, 283-289.
- Ryback, D., & Staats, A. Parents as behavior therapy-technicians in treating reading deficits (dyslexia). <u>Journal of behavior therapy and experimental Psychiatry</u>, 1970, 1, 109-120.
- Staats, A., Minke, K., & Butts, Priscilla.. A token-reinforcement remedial reading program administered by black therapy-technicians to problem black children. Behavior Therapy, 1970, 1, 331-353.
- Wahler, R., & Erickson, Marie. Child behavior therapy: A community program in Appalachia. Behaviour Research and Therapy, 1969, 7, 71-78.



ATTACHMENTS

Α	LETTERS TO FACULTY
в	LETTERS TO STUDENTS
С	APPLICATION FORM & SCREENING TESTS
D	
12	EVALUATIONAL SCALES



ATTACHMENT A

Letters for Faculty



1 November 1971 Colorado State University Psychology Department

Dear Colleague:

As part of an exploratory program into training paraprofessionals, I am initiating a Winter term, 1971 and a Spring term, 1972 program. This program will involve training of undergraduate students in consultation in behavior modification.

THE PROGRAM: For a select few undergraduates, I will be offering two separate experiences (one being the prerequisite for the other). As Special Studies in Psychology, in the Winter Quarter, students can receive intensive training in interviewing skills and principles of behavior modification. This Winter quarter work, under my direct supervision will enable the undergraduate enrollee to learn about the nature of interviewer responses, to engage in role-playing interviewing experiences, to receive feedback on his own skills, to observe interviewer models, to learn about reinforcement principles applied to children, to engage in designing behavioral programs for children with problem behaviors, and to learn to engage in consultation interviews.

For some who complete the Winter work, they will be invited to continue in the <u>Spring</u> Quarter in field placements. In this experience, the students will have the opportunity to put into effect the skills learned in the previous term. The field placement will be within the Larimer County area and will involve actual consultation experiences. All consultation will include two hour supervisory meetings to help the student in interviewing, behavioral planning, and strengthening his skills in providing consultation services for professional workers dealing with children.

TRAITS REQUIRED OF APPLICANTS FOR THE PROGRAM: I am hoping to rely upon your personal knowledge of your undergraduates to help me reach students for the Winter term. I realize that the time is very short since we are now in pre-registration. Additionally, some students may miss this opportunity because of inflexible schedules. However, I would much prefer the personal contact and recommendation route, than the indiscriminate public announcement via advertisements, or word of mouth. I conceive this to be a restricted program, limited to the very special undergraduate who can meet certain qualifications and who is excited by a different learning experience which would be of value to him in his career and even his future personal life.

For this reason, I hope you will consider the undergraduates whom you know and have contact with and who meet most or all of the



following characteristics:

- 1. full time undergraduate student,
- 2. academically solid, able to learn and apply principles,
- 3. responsible and can be depended upon to carry out assignments,
- 4. mature, relates comfortably to older persons, gains confidence,
- 5. mentally well organized, not flighty or impulsive,
- 6. articulates well,
- 7. capable of thinking analytically 'on his feet',
- 8. well groomed, unafraid to dress neatly and professionally,
- 9. aware of own limitations, unafraid of admitting need for advice,
- 10. interested in gaining experience in behavior modification with children's problems.

TIME REQUIRED OF APPLICANTS: Because I want to train these undergraduates intensively, a time committment is obviously needed. Although some students who complete the Winter quarter training will not be able to take part in the Spring term (because of enrollment limitations), all students who apply for the Winter term work should plan on being invited for the Spring term course as well. Hence, I am asking basically that the students think in terms of two quarters. The time schedule is as follows:

Winter Quarter, Interviewing & Principles of Behavior Modification:
(Offered as Special Studies), 4 credits, consent of instructor:
4 sections offered, each section meeting twice a week for
3 hours per meeting:

Section 1 - Monday and Wednesday morning (exact times arranged)

Section 2 - Monday and Wednesday afternoon (arranged)

Section 3 - Tuesday and Thursday afternoon (arranged)

Section 4 - Tuesday and Thursday afternoon (arranged)

(Each section to be limited to enrollment of 5 students).

Spring Quarter, Field Placement in Behavior Modification Consultation:
(Offered as Special Studies), 4 credits, consent of instructor:
hours and dates to be arranged, students are expected to commit
two hours blocked together on Monday or Wednesday or Thursday
plus one additional hour for field consultation work.

WHAT TO DO: If you have some undergraduates whom you think might qualify and who might have the interest and the time during these next two quarters, please:

(1) Write down the students whom you recommend to be applicants. I am hopeful you can come up with about 5 students to send our way for consideration. Put an asterisk next to the names you feel are especially qualified for training. Send me this list by campus mail or call me at extension 6363, no later than Tuesday afternoon, November 9, 1971. (I am asking you and a few other faculty for their personal recommendations. If you have none, please do NOT turn this request to anyone else to answer, and by all means do NOT post it).



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- (2) It would be extremely helpful if you might personally contact the students whom you are recommending and inform them about the program, and their possible interest. These students must contact me no later then November 15, 1971 so that we can complete the nccessary arrangements to plan for the first meeting in the next quarter (at an early enough date to permit Drop-Add activity, if necessary).
- (3) Once I receive your list, I will also contact by letter, these students and invite them to drop in for further explanations. We will also have available an application form, and will arrange a personal interview(in the event that we have more applicants than space). STUDENTS SHOULD NOT SIGN UP FOR THE SPECIAL STUDIES UNTIL FORMAL CONSENT IS PROVIDED BY ME.

I am personally excited about the possibilities and potentialities of this training. The students who are accepted have the unique opportunity of receiving special training which can be of value to them whether their major is education, child development, social welfare, hearing and speech, occupational therapy, psychology, or some other helping work. It is conceivable that we may be spearheading our own movement towards (1) providing more meaningful and valuable early training to undergraduates, while simultaneously (2) providing the community new rescurce personnel who can fit the service needs through consultation expertise. Since the objective is behavior modification consultation training for children with problems, the implications of the training experience are enormous.

I hope you are as excited as I am in seeing this work. Please take a few moments to send me your list and to personally convey your enthusiasm to your students. If you wish to clarify some questions, don't hesitate to call or stop by my office in the Social Sciences Building, C 52. But do hurry, we are short of time.

Richard M. Suinn, Ph.D. Professor & Associate Head

P.S. My apologies for not personally calling, and for this reproduced letter; given the time limitations and my desire to reach you quickly, I'm afraid I had to succumb to this means.

ATTACHMENT B

Letters for Students



3 November 1971 Colorado State University Fsychology Department

Dear

:

As part of a special program in behavior modification training, I am initiating a Winter term, 1971 and a Spring term, 1972 program. Students selected for this program will receive intensive training in consultation in behavior modification, and interviewing.

As part of my search for the special student whom I seek to join in this program, I have asked a handfull of faculty for their advice. Your name was recommended by a faculty person who thinks quite highly of your abilities, motivation, and interest.

Let me tell you something about the program. Two separate experiences will be offered, one being the prerequisite for the other. As Special Studies in Psychology, in the <u>Winter Quarter</u>, you would receive intensive training in interviewing skills and principles of behavior modification. You will become involved in learning about the nature of interviewer responses, how to interview effectively, the use of reinforcement, the design of behavioral programs for children with problem behaviors, and the consultation process. You will engage in role playing, receive feedback, and design behavior modification programs.

For some who complete the Winter term work, they will be invited to continue in the <u>Spring</u> Quarter in field placements. In this experience, the student will put into effect the skills learned in the previous term. The field placement will be within the Larimer County area and will involve actual consultation experiences. All consultation will include two hour supervisory meetings to help the student in interviewing, behavioral planning, and strengthening his skills in providing consultations for professional workers dealing with children.

To achieve the training and field experiences, you should:

- (1) Contact me immediately by telephoning ext. 6363, or seeing me in Social Science, C 52.
- (2) Fill in an application form, and appear for a screening interview.
- (3) Have a flexible enough schedule in the Winter Quarter that, if you are accepted for enrollment, you will be able to meet twice a week for 3 hours per meeting in one of the three sections:
 - Section 1 Monday and Wednesday morning (exact hours to be arranged)
 - Section 2 Monday and Wednesday afternoon (arranged hours)
 - Section 3 Tuesday and Thursday afternoon (arranged hours)



(4) Be enrolled as a full time student, with sufficient time to work with us and not jeopardize your usual academic work.

Although I would like to have all of those students recommended to me admitted into the training, unfortunately I must limit the enrollment. Hence the screening process, and the interview. I am planning on having those who actually are admitted into the course enroll during the "Drop-Add" period in the next term.

I am personally excited about the potentialities of the training. You have the unique opportunity of receiving graduate level training experiences which can be of value to you whether your major is psychology, education, social welfare, occupational therapy, hearing and speech, child development, or for that matter some other helping work. I believe the experiences will prove to be most relevant, and certainly of immediate benefit.

I wish I could promise you here and now that you will be among those screened into the course. But such a decision must be made on the basis of the application, the screening interview, and the number of students we can admit. I will say that you come highly recommended by one of the faculty whom I hold in high esteem (Benson, Delworth, Miller, Titley, or Viney of Psychology; Ball of O.T.; Duffy of Hearing & Speech; Dash of Education; Kuipers of Child Development; Enos of Social Welfare; or Titley of Academic Advising). If you are turned on by the idea, and if your schedule permits you to consider such a course, I urge you to contact me. The deadline date is November 15, 1971 for applications. Do hurry, we are short of time and must plan.

Cordially, Lecleard Main

Richard M. Suinn, Ph.D. Professor & Associate Head

P.S. My apologies for this reproduced letter; given the time limitations and my desire to reach you quickly, I'm afraid I had to succumb to this means.



ATTACHMENT C

Application Forms and Screening Tests Samples



APPLICATION FOR BEHAVIOR CONSULTATION TRAINING

Name:	Date:
Current Address:	year mo. day
Telephone: Major a	year mo. day
Year in College: (Circle): Fr So Jr	
Permanent address:	
Marital Status: Single Married Separate	ed Divorced Engaged
No. Credit hours enrolled this term:	No. Hrs. Completed:
Cumulative grade point (exclude P.E., music	c, crafts):
Have you carned less than a "C" grade in ar	ny class? Yes No
Which class? Your adv	visor's name
Are you employed; if so, how many hours	By whome?
Have you been seen by anyone for a major pl	hysical problem? Yes No
Have you been seen by anyone for psycholog:	ical counseling? Yes No
Parents' Occupations: Mother's	Father's
How many children in your family: # brother	rs# Sisters
Indicate your birth order (1st born, 2nd bo	orn, 3rd born, etc.)
If married, how many children do you have:	Ages
Occasionally we may wish to expedite acting this your consent is needed to permit one or request data appropriate to your application work, current academic files, health or psylor training purposes, audio or tape record desirable. Please indicate your consent for	of our professional staff to on (e.g., transcripts of college ychological materials, etc.)Also, dings and/or observations are
"I, author:	ize Dr. Richard M. Suinn or
or his designee, to request and receive accepsychological, or other similar reports, as recordings or observations during training such material will remain confidential to used pertinent to my application or training	nd to make audio, video tape sessions. I understand that professional staff, and will be
Date:	Clanatura
•	Signature



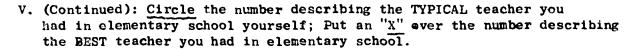
I. List any experiences which implied dealing with people or children, such as jobs, volunteer work, projects, clubs, etc. Note any

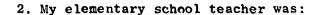
LEADERSHIP roles you had:

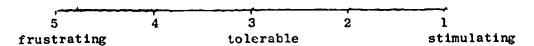
II. Indicate briefly why you are interested in the training:
III. Indicate your strengths which you feel qualify you for the training (EXCLUDING experience):
IV. Indicate your weaknesses which you feel may slow your training down:
V. For the following 5 items, circle the number corresponding to the description which most nearly fits your recall of your elementary school teachers when you were in elementary school. (Describe the typical teacher you had by using the circle; then re-read the items, and describe your best teacher by using an "X" over the number). 1. My elementary school teacher was:

unpleasant

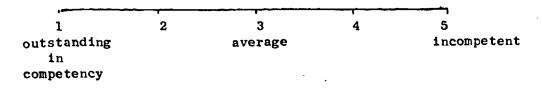




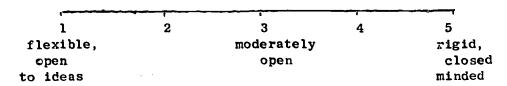




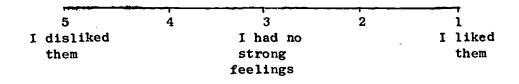
3. My elementary school teacher was:



4. My elementary school teacher was:



5. Regarding elementary teachers of mine:





RATINGS OF TEACHERS (APPLICANT'S)

I. The following list adjectives which may characterize the TYPICAL ELEMENTARY SCHOOL TEACHER in today's public schools. Place a check in front of as many of the adjectives which you feel describes the typical elementary teacher as you see her (him) in today's schools. Even though you might not have had any recent experiences with elementary teachers, please do the best you can. Use as many or as few adjectives as you wish.

_ well organized	_ likeable	_ temperamental
_ punitive	_ classroom is efficiently	_ timid
_ knowledgeable	run _ consistent	_ prepared for class
_ innovative	_ talented	
_ warm	communicates	_ uses praise for control
_ friendly	effectively	_ clear thinker
 makes routine decisions easily 	_ cheerful	_ encouraging
_ permissive	_ distant	_ empathetic
_ well trained	_ orderly	_ humorous
_ uses modern metheds	_ lenient	_ methodical
_ easygoing	_ competent	uses punishment for control
_ poised	_ traditional	_ bright
_ keeps class busy	caring	_ gains rapport
_ fair	_ affable _ punctual	_ understanding
_ articulate	_ firm	_ personable
_ makes subject matter relevant	_ perceptive	
_ spontaneous	_ patient .	÷
_ self assured	_ responsive	
_ gets assignments back to students quickly	outgoing	
_ strict	detailed	
_ creative	_ impartial	
_ stimulating	_ inquisitive	·
_ supportive	_ receptive t o ideas	



II. Re-examine the adjectives you checked. Double check (i.e., place an extra check) next to the 10 adjectives you feel are MOST CHARACTERISTIC of today's

QUESTIONNAIRE G

Name:	Date:
and feels about a number of impor The best answer to each statement We have tried to cover many diffe may find yourself agreeing strong disagreeing just as strongly with	rent and opposing points of view; you ly with some of the statements, others, and perhaps uncertain about gree with any statement, you can be
	t margin according to how much you mark every one. Write +1, +2, +3, you feel in each case.
+1: I AGREE A LITTLE	-1: I DISAGREE A LITTLE
+2: I AGREE ON THE WHOLE	-2: I DISAGREE ON THE WHOLE
+3: I AGREE VERY MUCH	-3: I DISAGREE VERY MUCH
1. The United States and Ru	ssia have just about nothing in common.
	rnment is a democracy and the highest government run by these who are most
	peech for all groups is a worthwhile ly necessary to restrict the freed
	a person would have a much better he believes in than with ideas he opposes.
5. Man on his own is a help	pless and miserable creature.
6. Fundamentally, the world	we live in is a pretty lonesome place.
7. Most people just don't	give a "damn" for others.
8. I'd like it if I could it solve my personal prob	find someone who would tell me how to lems.
9. It is only natural for a	persen to be rather fearful of the future.
10. There is so much to be	done and so little time-to-do-it in.
11. Once I get wound up in a	heated discussion I just can't stop.
12. In a discussion I often times to make sure I am	find it necessary to repeat myself several being understood

_13. In a heated discussion I generally become so absorbed in what I am

going to say that I forget to listen to what the others are saying.



14.	It is better to be a dead hero than to be a live coward.
15.	While I den't like to admit this even to myself, my secret ambition is to become a great man, like Einstein, or Beethevan, or Shakespeare.
16.	The main thing in life is for a person to want to do something important.
17.	If given the chance I would do something of great benefit to the world.
18.	In the history of mankind there have probably been just a handful of really great thinkers.
19.	There are a number of people I have come to hate for the things they stand for.
20.	A man who does not believe in some great cause has not really lived.
21.	It is only when a person devotes himself to an ideal or a cause that life becomes meaningful.
22.	Of all the different philosophies which exist in this world there is probably only one which is correct.
23.	A person who gets enthusiastic about too many causes is likely to be a pretty "wishy-washy" sort of person.
24.	In times like these, a person must be pretty selfish if he considers primarily his own happiness.
25.	When it comes to differences of cpinion in religion we must be careful not to compromise with those who believe differently from the way we do.
26.	The worse crime a person sould commit is to attack publicly the people who believe in the same thing he does.
27.	To compromise with our political opponents is dangerous because it usually leads to the betrayal of our own side.
28.	A group which telerates too much differences of opinion among its own members cannot exist for long.
29.	There are two kinds of people in this world: those who are for the truth and those who are against the truth.
30	In times like these it is often necessary to be more on guard against ideas put cut by people or groups in one's own camp than by those in the opposing campe.
31.	My blood boils whenever a person stubbornly refuses to admit he's wrong.



32.	A person who thinks primarily of his swn happiness is beneath contempt.
33.	Mest of the ideas which get printed nowadays aren't worth the paper they are printed on.
34.	In this complicated world of ours the only way we can know what's going on is to rely on leaders or experts who can be trusted.
35.	In the long run the best way to live is to pick friends and associates whose tastes and beliefs are the same as one's cwn.
36,	It is often desirable to reserve judgment about what's going on until one has had a chance to hear the opinions of those one respects.
37.	The present is all to often full of unhappiness. It is only the future that counts.
38.	If a man is to accomplish his mission in life it is sometimes necessary to gamble "all or nothing at all".
3 9 .	Mest people just don't know what's good for them.
40.	Unfortunately, a good many people with whom I have discussed important social and moral problems don't really understand what's going on.

ATTACHMENT D Training Materials

- D Training Model (also appears as Table 1)
- D-1 Rating Scale, Meeting 1
- D-2 Scoring Rules, Meeting 1 First 11 Excerpts
- D-3 Instructor's Key, Meeting 1
- D-4 Excerpts with Preset Responses, Meeting 1
- D-5 Second 11 Excerpts, Meeting 3
- D-6 Attending and Hearing, Meeting 5
- D-7 Interviewer Roles, Meeting 5
 Interviewee Roles



TABLE 1

TRAINING MODEL

I. SCREENING

- A. Faculty references
- B. Application form, schedule scale of times
- C. Tests: Dogmatism, EPPS
- D. Interview by two interviewers:
 "Why should you be selected?", "Why should you not be selected?"

II. INTERVIEW

- A. Pre-Session: Ss given first 11 excerpts and asked to type replies on ditto for distribution
- B. Meeting 1 (3 hours): Understanding Interviewing
- 30 min.
- 1. Introduction, Structure to program
- 30 min.
- 2. Observational Task
 - a. Pass out rating items -- purpose is to aid in determining training needs, e.g., observational skills and ability to obtain information quickly
 - b. Ss and observers fill in items

- 15 min.
- 3. Break
- 45 min.
- 4. Feedback
- 60 min.
- 5. Begin training in Discrimination using rules and excerpts with pre-set responses; instruct Ss to score remainder at home before next meeting
- C. Meeting 2 (3 hours): Understanding Interviewing --Continuation of Discrimination
- D. Meeting 3 (3 hours): Understanding Interviewing
- 60 min.
- 1. Continuation of Discrimination
- 60 min.
- 2. Return Ss' own responses to the 11 excerpts and have them score (instructor has scored these on his own key)
- 3. Have Ss suggest better responses to the 11 excerpts. Assign new 11 excerpts for takehome to write new responses based on their learning.



- E. Heeting 4 (3 hours): Interviewing Skills
- 75 min.

 1. Base line data: Ss rotate roles of interviewer -interviewee about 4-5' each (roles pre-assigned
 as vocational); Ss not to reveal or discuss details
 of roles. Videotaped.
- 60 min. 2. Lecture on interviewing using handout.
- 45 min. 3. Feedback from videotape for about 3 Ss.
 - F. Meeting 5 (3 hours): Interviewing Skills, Simple
- 25 min. 1. Feedback continuation for remaining Ss.
- 4 min.

 2. Attending and Hearing: Emphasis on being a "receiver". Videotaped.
 - a. Relaxed posture, eye contact, verbal/non-verbal responses all important.
 - b. One student-attending and one student-interviewee.
 - c. Attending student does 2 minutes of the best he can, then suddenly switches to the worse.
- 30 min. 3. Playback Attending Behavior videotape and discuss.
 - 4. Responding Training:
 - a. All Ss are randomly given an Interview Style from the following -- Passive Response, Tangential Response, Changing Response, Narrowing Response, Empathy Response, Rapport Building Response. Styles are used for 2 minute interview.
 - b. Ss also role play pre-assigned roles for the Response Style Interviewer. Interaction is videotaped. NOTE: roles are not to be revealed.
 - c. Discussion using the videotape. Ss encouraged to discuss their ability to control their interviewing style and their reactions.
- 24 min. 5. Summary of Interviewing Experiences to date.
 - G. Meeting 6 (3 hours): Interviewing Skills, Complex
- 20 min.

 1. Roles reassigned and videotaped consecutively.

 Interviewers are to use the most appropriate

 interviewing style for the interviewee roles.
- 160 min. 2. Playback and feedback.

11. Lecting 7 (3 hours). Interviewing Skills, Complex

90 min.

Lecture--demonstration on sequential memory, alternative hypothemes-formation, source of conclusions (disput observation, inferences, or hias).

90 min.

Role-playing with districtic interruption. Ss are interrupted and transfaged to deal with memory, hypothesis-form or drawing conclusions, based on the importew.

III. BEHAVIOR MODIFICATION

Meeting 8 (3 hours): Understanding Behavior Modification

90 min.

Lecture on Basic Principles. Encourage Ss to participate through examples.

90 min.

- 2. Assign readings and journal articles to abstract. Explain abstracting and goals.
- B. Meeting 9 (3 hours): Understanding Behavior Modification

60 min.

- 1. Using cases from Ss' experience or from case resource file:
 - Identify relevant and irrelevant information. Have Ss justify their positions in writing.
 - b. Present additional information based on Ss questions. Have Ss further discuss the relevancy of the questions and answers.
 - c. Continue procedure of questions, justification of questions, categorizing of questions' relevancy, answers, categorizing the value of the answers, etc.

120 min.

- 2. Written Test.
- C. Heeting 10 (3 hours): Understanding Behavior Modification

60 min.

Review Abstracts. Focus is on identifying reinforcers, method, cause, etc.

120 min.

- 2. Continuation with case discussion approach to classify relevancy of information.
- D. Meetings 11 to 16 (3 hours each): Behavioral Programming

180 min.

- Subjects are given behavioral programs to design from cases actually presented to them. Programs are discussed for simplicity, feasibility, and appropriateness.
- Meeting 17 (variable): Interviewing for Behavior Modification

Subjects interview a "live" client for 30 to 60 minutes,



D-1 Rating Scale for Meeting 1



FEEDBACK REPORT FORM

I. LEVEL OF PARTICIPATION: To what extent does the person join in?

Name: Rating:			ing:		
	Passiv				Outgoing
	1	2	3	4	5
	1	2	3	4	5
	1	2	3	4	5
	1	2	3	4	5
	<u> </u>	2	3	4	5

II. DOMINANCE: To what extent is the person dominant in an appropriate way?

Name:	Ra					
	Appropriate	Dominating,				
	Leadership & Initiation			Doesn't attend to Others		
	1	2	3	4	5	
	1	2	3	4	5	
	1	2	3	4	5	
	1	2	3	4	5	
	1	2	3	4	5	
		_				

III. COMMUNICATION: How able is the person in expressing his (her) ideas?

Name:					
	Articula	Rating: tes			Trouble
	well				Expressing
	5	4	3	2	1
	5	4	3	2	1.
	5	4	3	2	1
	5	4	3	2	1
	5	4	3	2	1

IV. LISTENING & UNDERSTANDING OTHERS: How well does the person listen to and understand what others are saying?

Name:	Rating:			•	
	Responses suggest nt understanding		Responses show understanding		
	1	2	3	4	5
	1	2	3	4	5
	1	2	3	4	5
	1	2	3	4	5
	1	2	3	4	5
		_			

V. WARMTH: Does the person seem warm, friendly or cold, distant?

Name:	Rati	ng: ""				
	Cold,Disinte	rested			Interested	in
		•			you, warm	
	1	2	3	4	5	
	1	2	3	4	5	
	1	2	3	4	5	
	1	2	3	4	5	•
	1	2	3	4	5	
	•	_				



D-2 Scoring Rules
First 11 Excerpts



RULES

SCORING OF BEHAVIOR CONSULTATION RESPONSES

A. General Categories of Responses:

- 1. Empathy: some comments by the referral agent demand, as the appropriate reply, an empathic response. Empathy involves a statement which indicates you understand the other person's feelings or state. It often is helpful in developing rapport.
- 2. Narrowing: some comments are more appropriately responded to by a reply which helps the other person to focus in more specifically on a topic. In our sense, narrowing serves to clarify or make more concrete the information being communicated. It is very valuable in helping the consultant to grasp the situation well enough to design programs to help.
- 3. Respect: respect conveys a supportive, evaluative (but in a positive direction) reaction towards the other person. It communicates your regard for the abilities, capabilities, etc. of the other person. This is often done in a manner as to avoid condescension. Respect also aids in rapport.

B. Frocedure for Scoring:

- 1. First, determine what type of response is demanded (is appropriate) given the referral agent's statement. Is empathy needed primarily, or is narrowing the more relevant reply? One way of judging this is to ask yourself: If I choose to say this, what will it lead the other person to say in return...is this productive?
- 2. Once you have decided on what is basically called for (empathy, narrowing, or respect), then decide whether the response given which you are scoring is worth a score of 1.0, 1.5, 2.0, 2.5, or 3.0. Definitions of these follow in the next section. Learn the definitions of the 1.0, 2.0, and 3.0 scores first.

C. Definitions for Scoring:

- 1.0: This is used when the response is harmful either to empathy, respect, or to narrowing & clarifying. It is used when the response detracts from progress. It is used when the response is inappropriate (e.g., the appropriate response is narrowing, but the person gives a high level empathy response instead).
 - Empathy: a 1.0 response is one which shows a misperceiving of the feeling expressed, or one which is an overexaggeration (e.g., "You poor dear", "That's just terrible!!) or one which is a gross understatement.
 - Narrowing: A 1.0 response is one which pulls the interviewee to an irrelevant topic, or encourages talking in generalities (e.g., "Tell me more about the child's emotional dependency reactions", "Tell me about the repressed conflicts"). A



1.0 is given when the response is an attempt at narrowing, but misstates the problem, or encourages the interviewed to continue talking about the problem in a vague may (e.g., you say "Tall me more about that" after the interviewed has described the situation in ambiguous terms). A 1.0 is given for responses involving drawing conclusions or making interpretations too early (e.g., "Do you think that the child needs attention?", "What do you think is the cause?", "How do you think the parents fit into this?"), or giving advice too early (e.g., "Why don't you try doing...?", "Have you tried...").

Respect: A 1.0 involves a negative evaluation of the interviewee's stated feeling, or a nonacceptance of it (e.g., "You sound angry, but that's not my job to deal with that", "Teachers shouldn't allow themselves to feel angry.", "You tried a lot of things and failed.", "You really tried THAT?"). A 1.0 is given when a fact is negatively evaluated or denied in a detrimental way (e.g., "No, you're really wrong, things don't happen that way.").

- 1.5: This score is given whenever a response is not as damaging as a 1.0 but not minimally helpful as a 2.0 would be. Regarding narrowing, a 1.5 is given when an attempt is made to help the interviewee be specific, but the attempt has a 50-30 chance of leading in the right direction (e.g., interviewee mentions more than one problem "She doesn't get involved...I don't know if I'm right to push her...could be the mother's attitude" and interviewer's reply is "Explain about the mother".) A 1.5 for narrowir; is also given for the early inquiry about what the interviewee has tried to do (e.g., "What techniques have you used?").
- 2.0: This score is given for responses which are minimally appropriate and facilitating, leading to an adequate productivity by the interviewes. A 2.0 response is acceptable because it will probably lead the interviewee ultimately to say something valuable, but it is not up to the level of the 3.0 response.

Empathy: a 2.0 response usually entails a straight restatement or reflection of the other person's feelings.

Narrowing: a 2.0 response opens further elaborations but without specific guidance from the interviewer towards more concreteness (e.g., "Tell me more...", "Explain further..."). Too open ended a question, given the interviewee's remarks.

Respect: a 2.0 response shows support, and is facilitating of the relationship (e.g., "Sounds like you've really worked hard to help this child", or "Let's see, I need some help in understanding a part of what you've observed, ...") (Note: the second example may be helpful as it conveys that you assume the responsibility for needing clarification, rather than implying that the interviewee was guilty of being vague, etc.). Sometimes a genuine expression conveys respect without casting blame, e.g., "I really lost you there."



- 2.5 : A 2.5 is a higher level response than the 2.0, but still not nearly the most productive possible. The interviewer is along the right track, but some element of the response makes it less than fully perfect. The 2.5 response clearly leads to productivity by the interviewee or establishes rapport and demonstrates empathy. It shows the interviewee that the interviewer is understanding the nature of the problem.
- 2.0: The 3.0 goes to the highest level possible. It is definitely appropriate for the context, leads to productivity in establishing rapport or clarifying, goes far beyond being only adequate. The highest level response possible for the circumstance, and is most facilitative in leading the discussion to deal with topics in a manner which can lead to program building by the consultant.

Empathy: there is no such thing as a 3.0 empathy response. Such responses involving empathy usually attend to feeling or emotions, and if pursued extremely well (so as to deserve a 3.0 score), will invariably lead the interviewee to focus on discussing feelings andemotions. In behavior modification consultation, this is not desirable. In psychotherapy, a 3.0 empathy response may be highly desirable.

Respect: again a 3.0 response is not appropriate for consultation since this takes the topic away from relevant information.

Narrowing: a 3.0 response is very desirable. It leads to a concrete and appropriate statement of the critical facts relevant to the interview. It is often judged in terms of the greatly helpful way in which the interviewee comfortably and precisely into clarifying and giving pertinent information. It narrows the topic to the discussion of the clearly pertinent issues. While at the same time conveying a sense of interest, acceptance, etc.

(E.g., "Would you give me a specific example of the things he did recently that pertain to the concern you have?", "So he did the following..., and then what happened next?" As with all scoring, the level of the score is a function of its being highly valuable for the context (thus, the examples given may be scored lower depending upon the nature of the interviewee's reply preceeding it).

D. General Statement:

It should be noted that a high level reply demonstrates to the interviewee that the interviewer is really hearing, even the unsaid implications. Additionally, the high level reply facilitates obtaining the kinds of data which is needed to construct behavior modification programs; for this reason, delving into feeling states, emotions, vague psychological terms, or irrelevant topics, are not valuable approaches. The consultant's function is not to provide psychotherapy, assuage guilt, swap stories, chat, or diagnose the presence of pathology. The consultant's task is to establish the interpersonal conditions which enhance and facilitates the interviewees' providing meaningful information for a program to be designed for the alteration of behavior.



- 1. I am concerned about Jimmy. He is so aggressive. He really tries my teaching skills I've tried every approach in the book. Do you think this behavior modification thing will work? I'm ready to try it, give it a wairl. Tell me what to do.
- 2. I have heard so much about behavior modification. So you really think you can teach me? I'm looking forward to this, it's a good thing to have a service like this. I don't know that I really have any problem children to talk about. Actually, I just wanted to learn more about behavior modification. Let's see, I do have Hal who's not really much of a problem, though. Thybe I should tell you about Jeffrey. . .?
- 3. Well I have this young girl that has some real emotional conflicts. She comes from a family with all kinds of stresses, the poor thing. The mother drinks, the father travels. She's kind of a sad withdrawn creature your heart goes out to her. I'm afraid she's on the verge of becoming an autistic child, or maybe even worse.
- 4. I really don't know what to do. I think it's valuable if you can see the child for yourself. I know I need a hand in handling him will you have some time to observe him? It would help you design the program for me. His name's Albert.
- 11. I am not sure if this is a problem, but George does not share in any of the cleaning up activities. After snack time everybody picks up their trash and we all march over to the big trash can and throw our stuff away. George absolutely refuses to take part in this activity so we just carry it over for him. Other than that problem he is no trouble.
- 17. I don't know why the principal referred Sally. Sally is no problem at all. She sits with her hands folded in class. . .never says a word unless called upon and acts like a perfect lady on the playground.
- 23. Oh, we do have one little guy, a four year old, who is really giving us fits! He always wants a toy or somethin; that another child has and when he doesn't get his own way he literally raises the roof. Before you know it he has a couple of our mides over there trying to quiet him down and other children are getting upset. We've tried everything we could think of to quiet him down but nothing seems to work. Even when we give him the toy he wants, by then he doesn't want it any longer and throws it down. . I think if he were my kid I'd spank him good: (Sigh) When it comes to this one, I give up.
- 26. Yes, I do have a problem child in my class. We've tried everything but nothing works. Here's his file with notes that the aides have made; you can-look at that and do whatever you want to do, but as far as I can see, you'll end up just like we have.



- 32. Billy picks fights with anyone he can—as a matter of fact, he's down in the play room now for starting a fight earlier. Every time he starts a fight I send him down there by himself, but that doesn't make him stop picking fights—if any thing, he fights more frequently now.
- 42. Hello, how can I help you? (Assume that this is from a teacher who has referred a case to you and that this is the first meeting you have with her and had never met her before. She comes in alone.)
- 46. Well, let's get on with it. I only have 15 minutes for my coffee break and Mrs. Brown said I was to spend it with you trying to straighten out the Matt boy. Personally, I don't believe in paying some child for being bad.



D-3 Instructor's Key



1. I am concerned about Jimmy. He is so aggressive. He really tries my teaching skills. I've tried every approach in the book. Do you think this behavior modification thing will work? I'm ready to try it give it a whirl. Tell me what to do.

Be careful of misreading her as doubtful. Be careful of telling her because she sounds ready.

2. I have heard so much about behavior modification. Do you really think you can teach me? I'm looking forward to this, it's a good thing to have a service like this. I don't know that I really have any problem children to talk about. Actually, I just wanted to learn more about behavior modification. Let's see, I do have Hal who's not really much of a problem though. Maybe I should tell you about Jeffrey. . .?

Flighty, overenthusiastic teacher who needs supportive direction; you really don't know if she has or does not have a problem help her decide.

3. Well, I have this young girl that has some real emotional conflicts. She comes from a family with all kinds of stresses, the poor thing. The mother drinks, the father travels. She's kind of a sad, withdrawn creature; your heart goes out to her. I'm afraid she's on the verge of becoming an autistic child, or maybe even worse.

Danger of talking about emotional psychodynamics. Getting totalk about others rather than the client.

4. I really don't know what to do. I think it's valuable if you can see the child for yourself. I know I need a hand in handling him will you have some time to observe him? It would help you design the program for me. His name's Albert.

Request for immediate observational; avoid teacher dictating what you should be doing to consult.

5. I just don't know what to do with little Betsy. She doesn't seem to take an interest in any of the activities. All she ever does is stand at the window and such her thumb. We have tried numerous things to get her involved but nothing seem to work. I just don't know what to do.

Typical problem of teacher expressing lack of direction. Request for empathy? Or narrowing.

9. To tell you the truth, I've given up on Jim. He's simply mean. I know that sounds terrible. . .but that's the only way to describe him.

Use of word mean -What to do about this? Does she really mean it--be careful.

11. I am not sure if this is a problem, but George does not share in any of the cleaning up activities. After snack time everybody picks up their trash and we all march over to the big trash can and throw our stuff away. George absolutely re-



14. What can I do with Jimmy he is a holy terror in class? He is driving me mad. If it's not one thing its another. You never know what he is going to do next. Like now look at him he just threw Sally out that plate glass window. I am at my wits end.

An immediate problem occuring now.

15. Mark seems to be so much slower than the rest of the class. I don't think he is less intelligent than the rest of the class but he just can't keep up or work as fast as the other children. He is a nice boy though.

Because of I.Q. be careful about being misled.

16. I don't know now you are going to help me with my children. All you people are alike you think you can storm in here and take over my classroom and come up with answers even though you don't know the children. I think it's a bunch of hogwash. How can you help me when I work with the children daily and still can't stop many of the problems?

Antagonism may occur to consultant.

17. I don't know why the principal referred Sally. Sally is no problem at all. She sits with her hands folded in class. . . never says a word unless called upon and acts like a perfect lady on the playground.

Someone else refers client: not teacher: how do you deal with teacher's lack of concern (with diplomacy.)

18. I could certainly use some help in understanding Mary. She is the most unhappy child I have ever dealt with.

How do you clarify emotions?

23. Oh, we do have one little guy, a four year old, who is really giving us fits! He always wants a toy or something that another child has and when he doesn't get his own way he literally raises the roof. Refore you know it he has a couple of our aides over there trying to quiet him down and other children are getting upset. We've tried everything we could think of to quiet him down but nothing seems to work. Even when we give him the toy he wants, by then he doesn't want it any longer and throws it down. . .I think if he were my kid I'd spank him good (Sigh) When it comes to this one, I give up.

Complex response by teacher: how do you determine where to start?

25. We have two little boys who seem to fight all the time. I have to watch them every minute or they will start fighting. I think one of them has a lot of potential and could develop into a real fine student but the other one likes to make trouble. I would like to be able to see them both settle down but I think there is little hope for the one. He just can't stant to see anyone get any work done!

Two children are being discussed simultaneously; consulant must narrow.



26. Yes, I do have a problem child in my class. We've tried everything but nothing works. Here's his file with notes that the aides have made; you can look at that and do whatever you want to do, but as far as I can see, you'll end up just like we have.

Teacher giving the consultant something to do which may take consultant away from interviewing the teacher.

27. How do I stop Susan from wetting her pants? We take her to the toilet but she won't go, then no sooner do we bring her back and she wets.

Common problem for nursery school.

32. Billy picks fights with anyone he can-as a matter of fact, he's down in the play room now for starting a fight earlier. Every time he starts a fight I send him down there by himself, but that doesn't make him stop picking fights--if any thing, he fights more frequently now.

Be careful about scolding teacher for "punishment". Is isolation maybe a reward?

35. Jimmy is a crybaby! I can't do anything with him and if you don't do something quick I'll have him transferred! Oh well, why bother to even tell you about Jimmy. The other guy who was here didn't help me any and I don't suppose you will either.

May need to deal with teacher's feelings before narrowing.

36. Sure I have a problem child but I don't think your new-fangled ideas and methods will help me anyway.

Hostile attitude by teacher.

41. Joan has a 'security blanket' which she refuses to part with. . . and to be honest, I just don't think a young child should be allowed to become so dependent—it could lead to all sorts of 'hangups.'

Raises question about teacher's interpretation of behavior as a hangup.

- 42. Hello, how can I help you? (Assume that this is from a teacher who has referred a case to you and that this is the first meeting you have with her and had never met her before. She comes in alone.)
- Confidentiality issue, are you sure this is the referral teacher before you reveal information on client.
 - 46. Well, let's get on with it. I only have 15 minutes for my coffee break and Mrs. Brown said I was to spend it with you trying to straighten out the Katt boy. Personally, I don't believe in paying some child for being bad.

Problem of a teacher who is in a rush.



D-4 Excerpts with Preset Responses



- 1. I am concerned about Jimmy. He is so aggressive, he really tries my teaching smills, I ve tried every approach in the book. Do you think this behavior modification thing will work? I'm ready to try it, give it a whirl. Tell me what to do.
- a) Jimmy's aggressiveness really has stymied you you're grasping for straws.
- b) You're having some doubts regarding whether this behavior mod thing can help?
- c) You want me to tell you exactly what to do wait a moment, don't be in such a rush, I'll do that in a moment after I get some details from you.
- d) Sounds like you've really been working hard to try to do something for Jimmy, you'd really like to help him.
- 2. I have heard <u>so</u> much about behavior modification. Do you really think you can teach me? I'm looking forward to this, it's a good thing to have a service like this. I don't know that I really have any problem children to talk about. Actually I just wanted to learn more about behavior modification. Let's see, I do have lial who's not really much of a problem, though. Laybe I should tell you about Jeffrey. . .?
- a) You're more interested in learning about behavior modification than about helping the children.
- b) Actually, sounds as though you really don't have any problems to discuss over.
- c) I'm glad you're so positive about behavior modification, so many teachers aren't, and I have to be kind of wary of what I say.
- d) Supposing you tell me more about whichever one you would like to start with and we'll see where we go from there.
- 3. Well, I have this young girl that has some real emotional conflicts. She comes from a family with all kinds of stresses, the poor thing. The mother drinks, the father travels. She's kind of a sad, withdrawn creature your heart goes out to her. I'm afraid she's on the verge of becoming an autistic child, or maybe even worse.
- a) Tell me more about the family conflict you mentioned.
- b) In what way do you feel the mother's drinking has affected the girl.
- c) Have you talked with the mother about her conflicts over the child.
- d) Sounds like a tough family situation, tell me something about how the child acts in school.
- 4. I really don't know what to do. I think it's valuable if you can see the child for yourself. I know I need a hand in handling him, will you have some time to observe him? It would help you design the program for me. His name's Albert.
- a) Yes, I'm sure I will have to get an observation to really do something.
- b) Is there something specifically you want me to see when I observe?
- c) I can come in tomorrow at 10 a.m. for an observation, how is that?
- d) I'll certainly want to do that meanwhile you might key me in to the problem.
- 5. Emilio just doesn't get along too well. He's from a Hispano family, and seems lost here. He's say, I don't know if he even understands me. Tother seems to use our school as a place for him since she has to work. I'm kind of worried since he doesn't seem to be benefitting from us.



- a) Is he bilingual?
- b) Yes, the shyness could be a handicap to his learning, tell me about that.
- c) Is it that you feel he is a withdrawn boy?
- d) I'm a little unclear about what we should pursue, is it something Emilio is doing, or is it that you're worried about whether he belongs in your school?
- 6. I just don't know what to do with little Betsy. She doesn't seem to take an interest in any of the activities. All she ever does is stand at the window and suck her thumb. We have tried numerous things to get her involved but nothing seems to work. I just don't know what to do.
- a) It seems that you are quite concerned as you have tried various things but nothing seems to work. What I am wondering is exactly what have you tried?
- b) What have you tried?
- c) Would you tell me about some of the things you have tried?
- d) Why don't you try to encourage her more?
- 7. Jimmy is such a problem. He is always disturbing the class and fighting with other children. Punishing doesn't seem to work. After a few minutes he goes back to the same behavior.
- a) Could you tell me what you have tried?
- b) Try talking to him and explain that this type of behavior isn't right.
- c) Find out why he feels hostile or needs attention. Then you'll be able to assess what to do.
- d) It sounds like his behavior is quite disruptive to the class. Could you talk in more detail about what he does, when and how you respond.
- 3. Jack is sharp as a tack, the little stinker--but you'd never know it to watch him in the classroom.
- a) You really sound frustrated.
- b) He kind of hides his talents under a basket.
- c) Perhaps he isn't as smart as you think.
- d) What is he like in the classroom?
- e) In what ways does he frustrate you in the classroom?
- 9. To tell you the truth, I've given up on Jim. He's simply mean. I know that sounds terrible . . . but that's the only way to describe him.
- a) He sounds like a real challenge.
- b) Gee, I really hear your frustration.
- c) I hope you don't give up. He can be helped.
- d) Can you tell me what you mean when you say mean.
- e) He's been real troublesome. Perhaps you could describe some of his provoking behavior to me.
- 19. Frank seems to have a difficult time doing tasks which require cutting and pasting. How can I help him?



- a) Could you tell me a little more about what difficulties he has in these tasks?
- b) Describe to me what happens when he is working at these cut and paste tasks.
- c) Why don't you give him specific tasks to do with regard to cutting and pasting and then reward him when he completes a certain portion.
- d) Does he seem to have trouble with any other types of manual work?
- 11. I am not sure if this is a problem, but George does not share in any of the cleaning up activities. After snack time everybody picks up their trash and we all march over to the big trash can and throw our stuff away. George absolutely refuses to take part in this activity so we just carry it over for him. Other than that problem he is no trouble.
- a) So George seems to be getting along in all the other areas except this one area and even then you don't see it as a major problem although you still have some concern about it. Could you tell me a little more about what things he does which makes you consider it as a problem?
- b) Has he always responded this way to marching to the trash can?
- c) Could you tell me a little more specifically what he does when you ask him to help and he refuses?
- d) What methods have you tried to get him to pick up his trash?
- 12. Mary doesn't want to take part in our group song. Whenever we have this she just freezes up and refuses to sing. I don't know what to do, we can't spend all our time on her, there are 20 other children in the class. Yet I feel bad because she is so scared of this. I hope it won't effect her in later years.
- a) The difficulty of Mary's seems to be a problem and have you concerned. Could you talk in more detail about what she does and what you have tried?
- b) How does she feel about singing?
- c) What specific things have you tried to get her to participate in?
- d) Why don't you try using encouragement to get her to sing then reward her afterwards?
- 13. I just don't know what to do with Ron and Cecil they never turn their work in. You try and get them to do the work and they just laught at you. What can I do?
- a) What have you tried up to this point?
- 5) It sounds like it is a real problem for you. What types of things have you tried with them and how do they usually respond?
- c) How does the rest of the class respond when these two students refuse to do their assignments?
- d) Why don't you try isolating them from the rest of the class so they don't get attention from them for their misbehavior?
- 14. What can I do with Jimmy he is a holy terror in class? He is driving me mad. If it's not one thing its another. You never know what he is going to do next. Like now look at him; he just threw Sally out that plate glass window. I am at my wits end.



- a) It sounds like his actions are very annoying and frustrating to you and the rest of the class. What I am Wondering though, is what techniques have you tried with Jimmy to control him?
- b) What have you tried up to this point and has he responded to any of the techniques?
- c) How long has he been this way? Is he the same way at home?
- d) He really does sound frustrating; have you tried homicide?
- 15. Mark seems to be so much slower than the rest of the class. I don't think he is less intelligent than the rest of the class but he just can't keep up or work as fast as the or ar children. He is a nice boy though.
- a) So you are somewhat confused about the discrepancy in Mark's ability and achievment but not sure what is causing it. Have you had his intellectual potential checked out for sure?
- b) Assuming he has the potential, what type of activities does he like to do or work best at?
- c) Have you tried anything to motivate him more?
- d) His slowness is a problem to you but you are not sure how to handle it.
- 16. I don't know how you are going to help me with my children. All you people are alike you think you can storm in here and take over my classroom and come up with answers even though you don't know the children. I think its a bunch of hogwash. How can you help me when I work with the children daily and still can't stop many of the problems?
- a) It sounds like you are upset with us because you feel we are going to come in and take over your class. This is not the purpose of our program at all; you certainly know more about your class that we do. Our purpose is just to help you by working with you using the principles involved in learning.
- b) I am sorry you feel this way about us, but that certainly is not our purpose in working with you.
- c) Why don't you give me a chance by telling me some of the problems you have and then you can judge the effectiveness.
- d) It's not that we want to take over your program at all, it's the idea that maybe we could help you by providing some possible alternatives that we see as a function of our particular orientation.
- e) The principles involved in our program have been effective in many other settings and there is no reason why they won't work here.
- 17. I don't know why the principal referred Sally. Sally is no problem at all. She sits with her hands folded in class. . . never says a word unless called upon and acts like a perfect lady on the playground.
- a) You sould like you are quite pleased with her.
- b) I don't know. . .its kind of sad to see a little girl acting like a young lady.
- c) Many times excessive quietness is an indication of underlying problems.
- d) It sounds as if she would be an easy child to deal with. . I wonder if she is always so quiet?
- e) What is she like on the playground?
- f) Can you describe how she gets along with the other children?



- 13. I could certainly use some help in understanding Mary. She is the most unhappy child I have ever dealt with.
- a) How do you usually deal with her?
- b) What is it that makes her hard to understand?
- c) Unhappy children are a puzzle sometimes. Perhaps you could describe her unhappiness to me.
- d) You really sound concerned.
- e) Could you describe some of lary's behavior that makes you think that she is unhappy?
- f) What do you mean by unhappy?
- 19. then there is Judy. She's really a lovable little girl but oh, so immature.
- a) You sould like you really like her.
- b) How old is she?
- c) How old does she act?
- d) Despite her good qualities you feel that she isn't quite acting her age.
- e) In what way do you mean immature?
- f) What behaviors in particular do you feel are inappropriate for her age?
- g) One should be careful how one uses the word immaturity, particularly during these early years, with such a wide range of individual differences.
- 20. I can't quite put my finger on it, but I feel that Jerry is not happy here.
- a) He's kind of a puzzle to you.
- b) Hmmm, that's strange; you have such a beautiful setting for young children.
- c) How do you think he should act?
- d) Some children are more inhibited in their feelings. It's hard to judge what a child is feeling.
- e) Kind of like he doesn't behave as you would expect. How does he behave?
- 21. I could certainly use some help with Jessica. She is an unhappy, miserable child who is disliked by everyone.
- a) It kind of sounds as if you have a hard time warming up to her also.
- b) hummm, it's tough to be rejected by everyone around. . .kind of sad to see.
- c) Gee, that's a sad situation for a young girl. . .why do you suppose she acts that way?
- d) Gee, that's a sad situation. Could you tell me why she is disliked?
- 22. Jody never shuts her mouth, from the moment she walks through the door in the morning.
- a) That must really bother you.
- b) It's as though she must constantly draw attention to herself?
- c) On what occassions does her talking disrupt what is planned for her?
- d) Let's see. Is her talking something that you want to do something with?



- 23. Oh, we do have one little guy, a four year old, who is really giving us fits! He always wants a toy or something that another child has and when he doesn't get his own way he literally raises the roof. Before you know it he has a couple of our aides over there trying to quiet him down and other children are getting upset. We've tried everything we could think of to quiet him down but nothing seems to work. Even when we give him the toy he wants, by then he doesn't want it any longer and throws it down. . .I think if he were my kid I'd spank him good. (Sigh) When it comes to this one, I give up.
- a) It sounds like his parents haven't taught him to behave very well.
- b) He really gets things in an uproar! It must be awfully aggravating when the things you try don't seem to work with him.
- c) Boy, he sounds like a real problem for you. What are some of the other ways that have been tried to quiet him down?
- d) Do you think the child really wants the toy or does he want attention? Have you tried ignoring him until he's quieted down?
- 24. Yes, there is this little three year old who just won't get involved with the rest of the kids, especially in group activities. Every time I encourage her to participate she just starts crying. Pushing her just doesn't work----and she seems so small and helpless.
- a) It sounds like you have some question about whether it would be better to push her or not.
- b) The little girl sounds pretty insecure to me!
- c) Have you tried to get her involved at her own speed?
- d) It seems to make you pretty uncomfortable that she isn't participating. You mentioned that she seems so small and helpless. Could you tell me a little more about that?
- 25. We have two little boys who seem to fight all the time. I have to watch them every minute or they will start fighting. I think one of them has a lot of potential and could develop into a real fine student but the other one likes to make trouble. I would like to be able to see them both settle down but I think there is little hope for the one. He just can't stand to see anyone get any work done!
- a) Have you tried seperating them?
- b) The one has a lot of potential but the other one is always bothering him. You would like to help them both but it seems like there isn't much you can do for the troublemaker.
- c) You sound pretty angry at the one boy. It sounds like it is pretty aggravating that he prevents the boy with potential from getting any work done.
- d) It sounds like you really have a problem with those two! What have you tried so far?
- 26. Yes, I do have a problem child in my class. We've tried everything but nothing works. Here's his file with notes that the aides have made you can look at that and do whatever you want to do, but as far as I can see, you'll end up just like we have.



- a) A real problem huh? Before I look at the file I'd like to hear from you about whatethe child does that has become such a problem.
- b) OK, I'll look at the file and will be talking to you about this child in a couple of days.
- c) You've just about given up on this one. What is it that this could does?
- d) I can't be of much help to you unless you tell me more about the child. Sounds like you really don't like this kid much.
- 27. How do I stop Susan from wetting her pants? We take her to the toilet but she won't go, then no sooner do we bring her back and she wets.
- a) What goes on when you take her to the toilet? How do you approach her?
- b) What have you done to get her to stop wetting her pants?
- c) Try reinforcing her when she does go to the toilet.
- d) What do you do when she wets her pants?
- 28. I am having a very difficult time with Mary. She is so disruptive to the rest of the class. As long as I devote all my attention to her everything is fine, but the minute I go off to do something else or help another child, she starts raising a fit and throwing things all over the room. I just don't know what to do. I can't spend all my time with her.
- a) Sounds like she can be pretty frustrating at times. Could you talk in a little more detail about what happens when she starts to throw a fit. How do you or your aides respond?
- b) She seems to be really demanding of you and you're not sure how to handle Mary. All you know is that you can't go on giving her all of your time in order to solve the problem.
- c) What does she do when you ignore her?
- d) Why don't you just punish her in some manner?
- 29. Jim is a nice boy but we can never get him to eat his lunch. We have tried all sorts of things but none of them work. It really is beginning to worry me, because he apparently doesn't eat very well at home either.
- a) Have you had this checked out by the school physician?
- b) You really seem concerned by his not eating and I wonder what specific things you have tried with him.
- c) Could you tell me specifically what you have tried with him?
- d) Jim's not eating has become a concern of yours but I am wondering if you feel this is something that can be worked out or if it involves some type of physical problem.
- 30. I don't know what good it's going to do to talk about Bert to you. I don't see how you can help! The problem is simply that he won't get involved with any of the other children or activities; that's all.

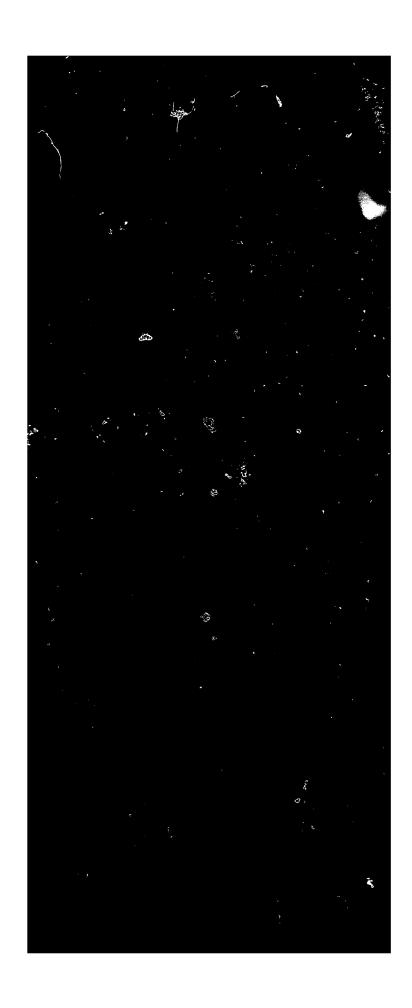


- a) You seem to be somewhat unsure of how I can help you.
- b) It sounds like this problem of Bert's is somewhat disturbing to you. Could you tell me a little more about Bert's behavior and what you have tried so far?
- c) What have you tried with him?
- d) You seem to be somewhat hesitant in explaining Bert's problem. I am wondering if you have had some experience with consultants before that has not turned out for the best.
- 31. Beth is so nervous that she pulls her eyebrows out. This happens at home, too. Her parents have told me. I don't know what to do about her.
- a) What have you tried with her?
- b) Do you have any ideas about what it is at school that starts her pulling out her eyebrows?
- c) Could you give me a little more information about the kinds of situations in which she pulls her eyebrows out?
- d) What have you discussed with her parents in terms of possible causes and solutions to the problem?
- 32. Billy picks fights with anyone he can—as a matter of fact, he's down in the play room now for starting a fight earlier. Every time he starts a fight I send him down there by himself, but that doesn't make him stop picking fights—if any thing, he fights more frequently now.
- a) You seem to realize that what you are doing with him doesn't work. Do you have any ideas about why it doesn't work?
- b) Sounds like sending Billy to the play room may be more of a reward to him than a punishment.
- c) No wonder his fighting has become more frequent! You are guilty of rewarding him for fighting by letting him play.
- d) What does he fight about?
- 33. Joe cries every day when his mother brings him. It's gotten so bad recently that his mother is staying about a half an hour to get him settled down now. And, you know, he begins to cry again when she finally leaves anyway.
- a) Is it common for mothers to stay like that?
- b) Have you tried having Joe's mother leave immediately and letting him just cry for a bit?
- c) What have you tried to get him to stop crying?
- d) It seems like the longer the mother stays the more difficult for you it is to get Joe settled down.
- 34. Rocky is a real bully: he's bigger than the rest of the kids and is always pushing someone around. We punish him for being a bully but he keeps it up anyway. I'll do anything that will get him to be a better boy.
- a) You seem concerned about changing him. How do you go about punishing him?
- b) Why do you think he feels the need to bully other children around?
- c) Seems like the punishment hasn't been effective. I'm wondering if you've tried any other ways of getting him to stop being a bully.
- d) Do you think he'd stop bullying the other children if some other kid would beat him up just once?



- 35. Jimmy is a crybaby! I can't do anything with him and if you don't do something quick I'll have him transferred! Oh well, why bother to even tell you about Jimmy. The other guy who was here didn't help me any and I don't suppose you will either.
- a) Sounds like some other consultant really let you down-what happened there?
- b) I'm wondering if you could give me some more information about Jimmy and the situations in which he cries and what you do about it.
- c) I'm not here to work out your feelings about the other consultant! Just tell me about Jimmy and we'll go from there.
- d) You don't seem to have much hope of getting any help from me because of the bad experience you've had with a consultant already. I'd really like to work this out with you and at the same time be helpful to you in working on Jimmy's problem.
- 36. Sure I have a problem child but I don't think your new-fangled ideas and methods will help me anyway:
- a) ON, if you feel that way about it.
- b) Maybe I could tell you a little bit about what we can offer and you would know better if we could be of any help to you.
- c) Just tell me about a problem child and we'll see!
- d) Sounds like you feel that we have a bunch of new-fangled ideas and you're not sure if they'd be helpful to you or not.
- 37. Here is all of the information we have on Jerry. His school file should give you everything you need to know.
- a) Uh um-that's fine and I'll certainly be interested in looking it over later, right now I would find it most helpful to talk with you and get your impression and ideas of what Jerry has been doing and how you as his teacher have reacted to him.
- b) Good. I also hope that you might be able to furnish me with a more personal view of the problem—could you perhaps tell me about it?
- c) What? Oh, his file--well, I'd rather just talk to you and ask you questions. .
 now exactly what is it that Jerry does which constitutes a problem. Please,
 be as specific and to the point as you can.
- d) Thank you, that is thoughtful and may indeed prove helpful. Now, I would like to talk to you a bit and ask you to describe a typical problem situation such as what does Jerry do? What are the reactions of those around him? Now have you tried to resolve the problem in the past? Things like that...
- 33. Boy what a "hot dog" that little fellow is. Now!! Is he ever a source of trouble—constantly into something, breaking toys, starting arguments, crying, demanding attention, just one thing after another. It takes 30% of my time tending to Eddie. As a latter of fact, we were on the verge of asking the parents to find a new nursery but. . .then Dr. Suinn contacted us and offered this "Behavior Control" program as a possible source of relief. So we have decided to give it a try.







- a) It is 'behavior modification' rather than a behavior control program. But no matter. . . So you say this young boy has really pushed you against the wall. Could you select one specific type of behavior you might like to change and give me as much detail as possible regarding that behavior.
- b) I certainly hope we can work together on helping this youngster change his behavior to a more adaptive and acceptable level. The first thing we need to do is focus on specific behavior or behavior patterns and work on modifying these in a systematic, step-by-step fashion-okay? Now about selecting and describing a trouble behavior as best you can--what sets it in motion and what effect it has on the children and adults here at the Tiny Boobs nursery.
- c) You say you spend 20% of your time tending to Eddie and trying to keep him out of trouble? Could you tell me more about this?
- d) Sounds like you really do have a problem. Perhaps, a change in nurseries might not be a bad idea—you know, he may not really like it here, perhaps some of the other children bring out the worst in him. But first let's talk about the problem behavior in more detail and then decide on the best course of action. .
- 39. Oh, yes, now are you? Mrs. Mullins did tell me that you were coming today. As I understand it, you will work with us and help us develop some programs to control Debbie's poor 'potty' behavior, is that right?
- a) Hopefully yes. . .
- b) Yes, I expect that by working together we can produce and employ some behavior modification procedures which may prove useful in improving this problem behavior.
- c) Right! What you said about "working with you" is really very important to the progress of the program. The better we can cooperate and communicate the better our results will be. Okay! So, on to the problem--now exactly what is it that we will be working on together. . .
- d) Gee, it really is nice to meet you. I'm certain that our association will be highly productive and effective. As I understand it, the problem centers around poor 'potty' control of a youngster by the name of Debbie--could you explacate and elaborate on the specifics.
- 40. Eddie cries a lot and unless we give him a lot of attention, he will cry for hours on end.
- a) Okay. . . now let's go back a bit. . .please explain as best you can remember what events are going on when Eddie starts crying.
- b) Exactly what do you mean by 'a lot of attention?" Can you explain?
- c) How does he react when you console him?...does he cling and demand to stay with you? Exactly what occurs?
- d) How do you know he will cry for hours if you fail to attend to his crying? Have you ever allowed him to go on crying?
- 41. Joan has a 'security blanket' which she refuses to part with. . .and to be honest, I just don't think a young child should be allowed to become so dependent—it could lead to all sorts of 'hangups.'



- a) What precisely is there about her behavior which distresses you?
- b) Hang ups? Why do you say that. . . have you perhaps observed other children develop later problems because they lugged around a security blanket?
- c) You have some pretty strong feelings about this use of a 'crutch'. . .what bothers you the most. her always carrying it or her crying if she can't find it? Or her arguing with the other kids if they take it? Or just what?
- d) What sort of a disturbance does her having a blanket create. . I'm not certain I understand exactly what it is in her behavior that disturbs you.
- 42. Hello, how can I help you? (Assume that this is from a teacher who has referred a case to you and that this is the first meeting you have with her and had never met her before. She comes in alone.)
- a) Well, we might start by discussing in a rather specific fushion the problem behavior of the youngster. . .huh! Larry Rut. . .Could you describe a typical problem situation.
- b) Well, hello yourself...and how can I help you? I understand you have a youngster who has created some control difficulties? Perhaps you should start with a blow by blow description of precisely what constitutes a problem. . When it occurs, what others do when it occurs, atc.
- c) I have the name of one...Jeff Muff...I believe he has some problem with rough play and disregarding adult management...Could you tell me something about that?
- d) Well, for starters could you tell me something of the problems you have been experiencing with Cindy Tang?
- 43. Jerry is very active at the nursery; it's so difficult to get him to take a nap or a rest period...I understand his mother doesn't discipline him and his father is away from home a lot...he is a salesman or something of the sort, I believe. And with four children to take care of, Jerry has three sisters, you can't really blame the mother.
- a) Do you know how he gets along with his father when his father is home?
- b) Could you tell me a little more about his behavior here at the nursery? Exactly, what is it that creates a problem for you and what does he do when you place requirements on him?
- e) That must certainly be aggravating and disruptive. Could you describe a typical day with Larry.
- d) The manner in which the mother handles him at home could certainly affect our program with him here at the nursery...but of course, I agree that we cannot blame her.
- 44. I'm not exactly sure what you need from me... Hary is not 'potty trained'. It's as simple as that.
- a) That certainly must create extra work for you! What have you done in the past as attempts to correct this behavior?
- b) Have you discussed this problem with her parents?
- Boy, I'll bet that gets pretty aggravating at times. Could you relate as specifically as possible, what occurs between you and Mary when she has an accident.
- d) What I need to know are the exact details related to this problem behavior. What you do, how the other children react, things like that.



- 45. The problem as I see it is: 1) Roy comes later (1 hr.) than the other children, 2) this leads to a very disruptive entrance, since we are always watching a comic film and/or having a snack and a drink, 3) I have asked the parents to cooperate, by coming either earlier or later...but the problem persists, 4) Roy starts to cry and doesn't want to stay. . .it's a mess.
- a) Could you explain precisely what you said to the parents, their initial reactions and responses.
- b) What would you say is your impression of the purents. . .in light of the fact they don't seem to appreciate how irritating you find this problem?
- c) Um, could you tell me more about how you react when Roy arrives late. What do you say, how does Roy react. . .where are the parents, etc., etc.
- d) Sounds as if this is rubbing you against the grain. Parents ignore your pleat for assistance, problem behavior continues and where do you go now? OK, suppose we start by looking in more detail at what occurs each morning. You anticipate the late arrival, right?... They arrive and what occurs, what do you do, what do the parents do, the other children, Roy?
- 46. Well, let's get on with it. I only have 15 minutes for my coffee break and Mrs. Brown said I was to spend it with you trying to straighten out the Katt boy. Personally, I don't believe in paying some child for being bad.
- a) Only fifteen minutes? Do you think we could arrange for more time? Perhaps talk with 'frs. Brown? As you know, you can't just approach these problems in a slap-dash fashion.
- b) Yes, that's right. Since we do have so little time let us get right down to case. Please tell me all you can about the Katts' youngster.
- c) So you're Miss Barrett irs. Brown spoke very highly of you and I'm looking forward to working with you. Now, since there is a time press we can get down to specific behaviors? Please tell me, as best you can, what needs straightened out in the Katts' boy?
- d) It certainly does confuse things when one is allowed such a short time to sort out the important details. But I'm confident that if we work together we can come up with a behavior modification program which will make your job easier and get desired results also. Now. . . relate as clearly as you can the specific problem behavior we'll be attempting to change.



D-5 Second 11 Excerpts



- 6. I just don't know what to do with little Betsy. She doesn't seem to take an interest in any of the activities. All she ever does is stand at the window and suck her thumb. We have tried numerous things to get her involved but nothing seems to work. I just don't know what to do.
- 9. To tell you the truth, I've given up on Jim. He's simply mean. I know that sounds terrible. . .but that's the only may to describe him.
- 14. What can I do with Jimmy he is a holy terror in class? He is driving me mad. If it's not one thing its another. You never know what he is going to do next. Like now look at him, he just threw Sally out that plate glass window. I am at my wits end.
- 15. Mark seems to be so much slower than the rest of the class. I don't think he is less intelligent than the rest of the class but he just can't keep up or work as fast as the other children. He is a nice boy though.
- 16. I don't know now you are going to help me with my children. All you people are alike you think you can storm in here and take over my classroom and come up with answers even though you don't know the children. I think its a bunch of hogwash. How can you help me when I work with the children daily and still can't stop many of the problems?
- 13. I could certainly use some help in understanding lary. She is the most unhappy child I have ever dealt with.
- 25. We have two little boys who seem to fight all the time. I have to watch them every minute or they will start fighting. I think one of them has a lot of potential and could develop into a real fine student but the other one likes to make trouble. I would like to be able to see them both settle down but I think there is little hope for the one. He just can't stand to see anyone get any work done.
- 27. How do I stop Susan from wetting her pants? We take her to the toilet but she won't go, then no sooner do we bring her back and she wets.
- 35. Jimmy is a crybaby! I can't do anything with him and if you don't do something quick I'll have him transferred! Oh well, why bother to even tell you about Jimmy. The other guy who was here didn't help me any and I don't suppose you will either.
- 36. Sure I have a problem child but I don't think your new-fangled ideas and methods will help me anyway.
- 41. Joan has a 'security blanket' which she refuses to part with. . . and to be honest, I just don't think a young child should be allowed to become so dependent—it could lead to all sorts of 'hangups.'



D-6 Attending and Hearing



ATTENDING BEHAVIOR

I. The purpose of this excercise on Attending Behavior is to teach you the first step in interviewing. You will then later build on this foundation.

Attending is crucial to interviewing, yet many are unaware of their lack of attending. Attending behaviors involve becoming like a "receiver": you do everything you can to receive, to so completely absorb the other person's communications, that you've become like a jar which is filling up. Done successfully, you will find yourself completely absorbed in what the other person is trying to communicate to you. Pone successfully, you will be unresponsive to irrelevant, external distractions.

- II. Attending Behavior has been analyzed into three components:
 - A. Let yourself get into a POSTURE, a physical position, which is relaxing for you, yet which permits you to remain alert. By being relaxed, you will not subject yourself to distractions. By remaining physically alert, you prevent yourself from losing your concentration...and avoid conveying a lack of interest to the interviewee.
 - B. Maintain EYE CONTACT. Attending requires your responding to verbal and nonverbal cues. Attending is conveyed by your interest. Maintaining eye contact helps achieve these.
 - Be careful, on the other hand, of overdoing the eye contact. Some interviewees will become uncomfortable at being stared at too long. This discomfort will interfere with good communication.
 - C. Use whatever VERBAL RESPONSES & NONVERBAL RESPONSES which convey that you are actively involved in following what the interviewee is trying to communicate, what he feels or thinks, what he is after. Use whatever variety of words or actions which show that you are keeping in tune with the interviewee, and working to truly understand him (rather than simply mimicing).
- III. There are two steps to this excercise:
 - A. First, spend about two minutes by your watch, doing the best you can to show Good Attending Behavior.
 - B. Then (after you note that about 2 minutes have passed), suddenly switch and show POOR Attending Behavior, the profest you can. Do not announce that you are making this shift; simply casually and smoothly shift. Maintain this for about 2 more minutes or until the instructor interrupts you.

DO NOT DISCUSS THIS WITH ANYONE, BEFORE OR AFTER THE ROLE PLAYING!



D-7 Interviewer, Interviewee Roles



[To Instructor: These roles are to be and one role distributed to the trainees in random week].

PASSIVE RESPONSE STYLE: You are to interview relying primarily upon a passive response style, e.g., "I see", "Yes", "Uh-huh", "I get the point", "Interesting".

SURMARY RESPONSE STYLE: You are to interview relying primarily upon the summary response style, e.g., "So, you feel (restate the person's statements)..."

TANGENTIAL RESPONSE STYLE: You are to interview relying primarily upon the tangential response style, e.g., inquiring about topics which seem relevant, but are not directly relevant. Unlike a Changing Response style (which are a clear change to another topic), the tengential response still seems on the topic.

NARROWING STYLE: You are to interview using a narrowing approach. You try to direct your interviewee into elaborating in more detail, being more clear, communicating more precisely on important topics. You do not necessarily limit the person to one topic; but you do try to help the person to stay as long as necessary to really tell you the details of the major topics. You are working for preciseness n your understanding; when you are satisfied, you may want to narrow in on another relevant topic.

EMPATHY STYLE: You are to interview using the empathy communication approach. You are very interested in demonstrating that you really understand the other person's position, fælings, way of perceiving the problem. You are trying to show (and really grasp) just how the other person feels and thinks.

RAPPORT: You are to interview using the rapport building approach. Your main concern is building a positive relationship between yourself and the interviewee. Although this may involve showing your acceptance of the other person's problems, for some clients you may want to avoid being overly solicitous, etc. Rapport building may begin with an interested, friendly conversation rather than a sudden focussing on the person's feelings or problems. You must keep alert on your impact on the interviewee.

LEADING RESPONSE: You are to interview using the leading response style. The leading style helps to take the interviewee into more depth, and includes such open-ended questions as Tell me more about ","Would you elaborate more on ","You commented , explain that a little further", etc.

CULNICING RESDONSE. Von one to interview using the chaming response



PRESENTING TOPIC: You are an elementary school teacher. You are meeting with the interviewer-consultant because of a child who cries at the slightest thing. You have asked for advice.

GENERAL: You enjoy meeting and talking with new people, so much so that you tend to be over-talkative and sociable at times. This is one of those times.

You will talk quite a bit, without prompting about all the details of the child, and any topic which seems to naturally come up, such as your experience in reading about behavior modification, how it was first mentioned in one of your teacher-training classes, about the school you went to for teacher training, etc.

The child: is very likeable, does many cute things in your kindergarten, is very loveable in appearance, well behaved, etc. but will have tears and weep even when offered help for something (as if she felt she was being scolded).

SPECIFIC: If you are asked to detail the child's problems, what happens that leads to crying what specific things go on (really narrowing, concrete directions by the interviewer) -

- 1) make up some pertinent details of your own,
- but keep getting off the subject as you enjoy talking about things.

PRESENTING TOPIC: You are a teacher who is meeting with a consultant in behavior modification to discuss an "aggressive, disruptive child name Bobby".

GENERAL: Regardless of the way in which the interview begins, you focus you comments on how negatively you feel about Bobby. "He's constantly getting into trouble, never listens, disrupts the class, disturbs the educational atmosphere."

Convey how strongly you feel negatively about it all. He really is a child you dislike for what he is doing.

SPECIFICS: If the intergewer works on establishing rapport and conveys appreciation for your reelings, then start becoming cooperative and helpful in responding appropriately to the interviewer's attempts to guide the interview. Make up details as you go along.

If the interviewer does anything other than the above (e.g., tries to narrow, get concrete information, etc.) give only vague answers (such as "he's always deliberately in trouble"). Do not become hostile towards the interviewer.

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IN __RVIEWEE ROLE

PREDMITING TOPIC: "I just stopped by to chat for a big. Saw your door open, hope you don't mind my dropping by. Maybe, you remember me; I was in your class last term".

- GENERAL: 1) You are an outgoing, friendly, pleasant person who likes to char with people, including professors.
 - 2) You don't kave any problems to really talk over; you're an adjusted person; you really did just stop in for a social chat.
 - 3) You're an open person, in tune With your feelings. So anytime the topic of feelings are touched upon, you are ready to express yours, e.g., "Yes, that bothers me too" or "There are times when I feel anxious on exams" or "S metimes I wish my parents would leave me alone and treat me like an adult".

However, you do not have any abnormal problems. You know and accept your feelings. These feelings are no worse than other people's, they don't get in your way, they are often appropriate to the circumstances. Consequently, you will talk about the feelings, but eventually you want to shift to other topics, or even ask the professor (the interviewer) about a new topic.

- 4) If given a cue from the interviewer, (such as, 'Was there something specific you came in to talk about; we've been conversing for awhile now and I'm not sure I know what you want"), then easily state, "Just stopped by to say hello, to talk a little, am I interfering with something you were doing? I'll leave if you wish."
 - a) If interviewer keeps you engaged in talking some more, again pursue any topic freely and readily.
 - b) If interviewer closes the interview, say goodbye, leave.



PRESENTING TOPIC: Let the interviewer know that you have known one another as next door neighbors for some time; you dropped in today in the afternoom to chat.

- 1) Start with the above structure. "I just stopped in for a chat; you know we've been neighbors for quite a while now. I had a moment free, just stopped by; hope you're not involved in something important."
- 2) Next, talk about some generalities: "What did you think about that movie in town?" or "Say, what about this weather we're haveing".
- 3) After a little of the generalities, during a silence from the interviewer, casually open the topic by, 'Do you ever get to feeling down in the dumps sometimes?"
- GENERAL: 1) You want to talk to this friend of yours about some down-in-the dumps feelings. You really want to share your feelings on this. You do not want to talk about specific causes, circumstances that prompt these feelings, things that help you to understand your feelings. You simply want someone to listen, to release these feelings, catharsis.
 - 2) Whenever given a chance, continue to talk about how depressed you're feeling. Stay only with this topic, try to get it all out.
 - a) you feel life isn't very challenging.
 - b) you feel things aren't going right.
 - c) you know you have life pretty good, but somehow you feel sad.
 - d) make up pertinent topic around which to talk about the depression (e.g., not contributing to society, not doing something significant on the job, not feeling a positive source of guidance for your children, or any other topic you wish to choose).



PRESENTING TOPIC: You are a student in a university seeing a counselor in your first therapy discussion. It is an appointment which you asked for: you told the secretary making the appointment that it was for "personal problems".

- CENERAL: 1) Is are somewhat embarassed about your problem, dont' really know if you want to or can talk about it. So you are inclineed to want to avoid the topic, to toy with the statement that you"really didn't want to take up the therapist's time, "it's not so important after all when you come in; you know how things seem so important at the time"; "it's really kind of silly".
 - 2) If the interviewer <u>reflects</u> or <u>restates</u> your statements, then agree ("Yeh, I think it silly", or "Yeh, now that I think about it, it really isn't so important anymore").

If the interviewer does something to directly encourage you to talk about the problem, ("Yes, but why don't you tell me somthing about the problem and we'll see how troublesome it seems to you"), then go into details.

SPECIFICS: You are worried about whether you can ever attract a (wife, husband); you have questions about whether you are attractive enough or whether your personality is good enough; you do want to get married someday. You feel uncomfortable in the presence of other people socially.



PRESENTING TOPIC: You are a teacher who has asked to see a consultant on behavior modification for Betty, an "immature child". Nursery School.

- GENERAL: 1) You are receptive to consultation and truly interested in help.
 - 2) But, behavior modification is so new as a concept to you that you really don't know what kind of information is important to convey you don't say this, though.
 - 3) Since you do not know what is important, you wait for the lead and direction of the interviewer; you rely upon the interviewer to show you by her questions, what type of information is needed.
 - 4) If you have a direct question, you give a brief, direct and honest answer.

If the interviewer restates your comments, you say "Yes, that says it well" or "That's right" etc., then pause as you wait for direction from the interviewer.

- 5) If the interviewer skillfully is leading you to talk about pertinent information, it is:
 - a) Betty is 4 years old.
 - b) She thumbsucks.
 - c) She cries when faced with frustration, either by other children or by the teacher or by obstacles.
 - d) She appears to be less intelligent than other children (e.g., her play is at a lower level, such as less complicated fantasy play)
 - e) Give specific behaviors only if asked. Otherwise give such answers as: She's younger than the others (instead of Age 4)

 She acts less mature (instead of she thumsucks)

 She's easily frustrated (instead of she seems

She's easily frustrated (instead of she seems frustrated when other children dont' share)

She's easily frustrated (instead of she shows her frustration by crying)

She does not seem up to par (instead of she seems less intelligent in that her play behavior isn't as complicated)

Etc.



PRESENTING TOPIC: You are a parent with a child with a "perceptual-motor" problem. You are seeking help regarding how you, as the parent, can help the child. You have heard that behavioral techniques can help learning.

GENERAL: lyou are quite sure in your own mind that there is a perceptual motor problem:

- a) The teacher has said so.
- b) You've read professional books on the topic and the child has all the sign.
- c) Child shows:
 - 1) clumsiness, e.g., cant' hold his balance, doesn't skip well.
 - 2) slow in identifying right from left, tends to write sackward.
 - 3) reverses letters in writing.
 - 4) has been tested and found to be normal intelligence.
- 2) The school does not have any formal progam or excercises to help your boy.
- 3) You want advice on what programs, what steps to take at home to help this boy, using behavior techniques.
- SPICIFIC: 1) You are comfortable about the fact that you recognize the child has a problem. You are not emotionally upset, you accept it all.
 - 2) You present your information and your desire for help, then wait for the inerviewer to either:
 - a) ask you more precise questions to provide more information, or
 - b) offer you some definite program to take home with you to implement.



PRESENTING TOPIC: You are a teacher who has been advised to talk to a consultant about an acting out child.

- CENERAL:
- 1) You personally feel threatened with the idea that you were advised to seek help. You basically feel that if you really get help, it will prove that you failed to do your job.
- 2) You are also threatened by feeling behind the times and uninformed about behavior modification techniques.
- 3) Your basic feeling is that you have done all you could, that you are a good teacher, that since you failed, nothing wil work. Moreover, the child really should be kicked out of school.
- 4) You show your threat by not being very helpful in the interview, being vague in your replies, brief in replies. Polita, but not helpful.

You are willing to talk about the child's problems, however, but stick to description of what he does WRONG willing to talk about what situations lead to his doing urong.

SPECIFIC:

- 1) boy is from minority group.
- 2) is disruptive, talks back, hits owners, suspect him of cheating and stealing, swears.
- 3) if the interviewer ever says or does something which truly makes you feel less threatened, then be cooperative.

PRESENTING TOPIC: You are the mother (or father) of a teenage girl. She is "masty" toyou and your spouse and the other child in the family. You want some advice on management.

GENERAL: 1) The teenager, Sally, is the oldest child.

2) Two years ago, Sally seemed fine.

3) Problem is she grumbles about doing the household chores, will swear at her younger brother, seems generally disgusted at everyone and everything.

4) We can't talk to her. She is alienated. Sometimes she has talked about suicide, but never in detail, and always when angry with parental demands.

SPECIFIC: Focus your conversation on how difficult this girl is to manage, how alienated life has become in the home.

Make any details up as you go along.



ATTACHMENT E

Rating Scales for Project Staff & Teachers



RATING OF CONSULTANT'S SKILLS (TEACHERS)

Please rate your behavioral consultant using the 5 point scales below. Although the paraprofessional consultant is highly skilled and has been trained as a behavioral specialist, we would appreciate the ratings for research purposes. On each item, circle the rating that best describes the paraprofessional consultant. Think of concrete circumstances to aid you in your rating. Thank you for the effort and cooperation.

1. INTERVIEWING: After the interview did you feel the consultant had been skillful in obtaining the pertinent facts on the problem?

1 ? . 3 4 5

Poor, ignored Acceptable, Excellent, was to topics, chatted, had most facts, the point, useful seemed too generally relevant guidance of interview, random interview topics relevant topics

2. PROFESSIONAL ATTITUDE & SKILLS: How do you feel about the consultant's interaction with you during the interview?

5 4 3 2 1

Outstanding, Acceptable, Unprofessional, impressed with neither poor immature professional nor outstanding attitude displayed

3. COMMUNICATION SKILLS: How well did you feel the consultant conveyed his ideas to you in reply to your questions? Does the consultant use oral communication well?

1 2 3 4 5

Poor, difficult Acceptable, Communicates orally to understand sometimes unclear quite well what he is but gets message trying to say, or across uncommunicative

4. If you had another referral problem, would you prefer to meet with this consultant or another one:

Prefer the same Prefer to see a different Does not matter consultant again consultant to me

5. Please list specific traits, behaviors, mannerisms, techniques, etc. used or shown by your con sultant which were especially helpful to you during the interview:

6. Please list specific traits, behaviors, etc. which interfered:



RITING OF CONSULTANT'S ABILITY (FACULTY)

This scale is for ratings of the paraprofessional's current level of functioning. On each item, circle the rating score that best describes the paraprofessional. Think of concrete examples of the trait as an aid in rating.

in rating.	•			
1. KNOWLTI	GE OF BASI	C PRINCIPLES	OF BUHAVIOR	LICOLIFICATION:
1	2	3	4	5
No			_	Well
knowledge				Informed
2. ABILITY	TO SPPLY	PPINCIPLES TO	PCTUAL SCHO	COL PROBLEMS:
1	2	3	4	5
Cannot				Highly skilled
apply				at application
3. OVERALI	L BILITY T	O RTLATE TO	PHOPLE:	
1	2	3	4	5
Relates			_	Relates well
poorly				
4. RELIAB	ILITY (Does	assignments	on time, for	llows directions, etc.):
5	4	3	2	1
Very				Needs constant
dependat	ole			supervision
5. INTERV	IFW TECHNIO	ሆ፣:(Obtains o	concrete info	ormation rapidly & precisely):
5	4	3	2	1
Excelle	en t			Poor, unable to guide
	•			interviews towards goals
6. OVERALI	L RESPONSIV	FNESS & ATTI	TUDE TOWARDS	TRAINING;
1	2	3	4	5
Poor,				Excelient, highly flexible
does ov	v n			& amenable to change
thing,	negatavisti	c		
7. SENSIT	IVITY TO TH	e nuances an	D PRESES OF	DEALING WITH SCHOOL STAFF:
5	4	3	5	1
Very				Poor, unaware of channels,
alert,				need for regard of staff o
diplom	atic			officials

